



Monmouthshire County Council.

Education Committee.

ANNUAL REPORT

OF THE

MEDICAL INSPECTION DEPARTMENT

FOR THE YEAR 1926.



Monmouthshire Education Committee

MEDICAL INSPECTION.

Annual Report for 1926.

MR. CHAIRMAN, MY LORDS, LADIES AND GENTLEMEN,

I have pleasure in submitting for your consideration the Annual Report upon the Medical Inspection of School Children under your jurisdiction for the year ended December 31st, 1926.

The Report is arranged upon the lines suggested by the Medical Department of the Board of Education, in the circular letter issued in December, 1920, and Schedule to Form 6M., dated 15th November, 1926. The statistical tables contained in the Appendix have been compiled in accordance with the Board's request in the latter circular.

ELEMENTARY SCHOOLS.

POPULATION, ETC.

Area of the County of Monmouth (excluding autonomous areas of Abertillery, Ebbw Vale and Newport):—331,696 acres.

Estimated population at 31st December, 1926 (excluding autonomous areas)—298,530.

Number of Schools 195, with 287 departments.

Number of children on registers of Elementary Schools at 31st December, 1926—54,282.

School accommodation, 31st December, 1926:—60,515.

1. MEDICAL INSPECTION STAFF.

The County Medical Officer is also School Medical Officer. There are ten Assistant Medical Officers, viz. :—

Henry W. Catto, M.B., B.S., D.P.H., County Bacteriologist and Pathologist, and Deputy County Medical Officer.

Mary Scott, M.B., Ch.B.
 Winifred Austin, B.A., M.B., B.S.
 Evan W. Griffith, M.R.C.S., L.R.C.P.
 Philomene R. Whitaker, M.B., B.S.
 Margaret M. Proudfoot, M.B., Ch.B., D.P.H.
 Gladys Russell, M.B., Ch.B., D.P.H.
 Mary H. M. Gordon, M.B., Ch.B., D.P.H.
 Robert Lockhart, (M.C.), M.B., Ch.B., D.P.H.
 Annie Roberts, M.A., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.
 (Commenced duties 1st January, 1926).

Dr. Russell was absent through illness for the greater part of the year, and Dr. Herbert M. Ayres, M.R.C.S., L.R.C.P., temporarily took her place.

Three School Dentists are engaged, viz. :—

C. J. Hurry Riches, L.D.S., R.C.S. (part time).
 C. G. Saxon, L.D.S., R.C.S., (whole time). (Commenced duties
 21st June, 1926).
 Ness Stewart Muir, L.D.S., R.C.S. (whole time). (Commenced
 duties 26th January, 1927).

Mr. H. W. Wallis and Miss E. A. Gower have left the service of the Committee.

The services of the following Specialists were again available during the year under review :—

R. J. Coulter, M.B., F.R.C.S.	Special Refraction and Ophthalmic work.
J. A. Lee, M.B., F.R.C.S.	Nose and Throat treatment.
J. McGinn, F.R.C.S.	X-Ray treatment of Ringworm.

There are twenty-nine health visitors devoting their time to School Medical Inspection work, in conjunction with Maternity and Child Welfare work, and one engaged jointly with the work of these two sections, and upon inquiry work for the County Mental Deficiency Committee. The Lecturer in Nursing under the Higher Education Committee also gives one or two days a week to School Medical Inspection work.

2. CO-ORDINATION.

(a) *Maternity and Child Welfare.*

The Co-ordination of the School Medical and the Maternity and Child Welfare services was inaugurated in the year 1920, and has been continued

during the year under review. The Assistant Medical Officers undertake the supervision of Maternity and Child Welfare Centres in addition to the medical inspection and treatment of school children.

The twenty-nine health visitors have been allotted districts, in which they reside, and they are responsible for home visiting of infants from birth to five years of age under the Maternity and Child Welfare Scheme, and of children of school age under the scheme of Medical Inspection. They also assist at Maternity and Child Welfare Centres and School Clinics.

Several of the Health Visitors also help at Tuberculosis Dispensaries.

(b) Nursery Schools.

No Nursery Schools have been established in the Administrative County.

(c) Care of Debilitated Children.

The majority of debilitated children under school age are supervised at the Maternity and Child Welfare Centres.

Debilitated children of school age come to the notice of the Medical Inspectors during school inspection and are examined at the schools, and when attendance at School is impossible, they are seen at their homes. Observation is kept upon the child from birth to the school leaving age.

THE SCHOOL MEDICAL SERVICE IN RELATION TO ELEMENTARY SCHOOLS.

3. SCHOOL HYGIENE.

The special survey of School buildings by the Assistant Medical Officers, commenced in 1925, was continued during the year 1926, when 95 school buildings were inspected. The following is a summary of the reports:—

Environment	Satisfactory	...	...	...	...	95
Type of Building.	The prevailing type of building is stone built with slate roof. There are also in use buildings of brick, slate roofed. In two or three districts, pending the erection of new premises, some of the departments are accommodated in galvanised iron buildings. The later designed schools are built on the corridor and central hall system, and are substantial, commodious, airy and well lighted.						
Sanitation.	Satisfactory	...	...	...	...	94
	Middens to be cleaned more frequently				...	1	
Sanitary Conveniences	Satisfactory	...	...	...	...	81
	Unsatisfactory conditions:—						
	No flush to Urinal	...	3	Insufficient water supply		1	
	Urinal not properly flushed	1		Choked drain	...	1	
	No lavatory for female staff	1		Require limewashing	...	2	
	W.C's needing repair	...	3	W.C's. not very clean	...	2	
Lighting.	Natural	...	...	Satisfactory	...	95
	Artificial	...	...	Satisfactory	...	95
Water Supply.	Satisfactory	92	No water supply	...	3
Heating.	Satisfactory	93	Inadequate	...	1
					Stove requires repairing		1
Lavatories.	Satisfactory	...	...	88		
	Unsatisfactory conditions:—						
	Washbasins not satisfactory	3		Insufficient washbasins		2	
	No drinking mugs	..	1	Eight gullies choked	...	1	
Cloak Rooms	Satisfactory	...	...	89		
	Unsatisfactory conditions:—						
	Too small	...	...	1	Accumulation of old desks	1
	Pegs inadequate	...	...	4		

Ventilation.	Satisfactory	...	...	91		
	Unsatisfactory conditions:—				Windows need repair	... 1
	Windows in classrooms do not open	...	...	2	No window cords	... 1
Desks.	Satisfactory	...	...	94	In one classroom obsolete	1
Cleanliness of Premises.	Satisfactory	...	...	95		
Playground.	Satisfactory	...	..	89		
	Unsatisfactory conditions:—				Needs repair	... .. 2
	Accommodation insufficient		1		Drainage inadequate	... .. 3
Miscellaneous Defects.	Satisfactory	...	...	85		
	Unsatisfactory conditions:—					
	Leak in roof	...	...	1	School requires replastering	1
	Walls require reliming		3		Floors need repair	... 1
	Room overcrowded	...	2		Tanks in playground need	
	Top to stove required	...	1		overflow pipes	... 1

The conditions found to be unsatisfactory were notified to the County Sites and Buildings Committee.

The Board of Education in the Circular 6 M., issued in November, 1925, suggested that in the review of the hygienic conditions of schools, note should be made of the arrangements for (i) the warming up of meals brought to school by the children (ii) the supervision of children during the meals, and (iii) the service of meals.

Investigations were made at a number of schools during the year and it was found that the arrangements varied considerably. In only a few of the schools is provision made for the warming up of meals brought by the children, and at no school was there any service of meals. Hot tea or cocoa is supplied at some of the schools. In all cases where children stay in school for meals, a teacher remains to exercise supervision.

The report of the County Education Architect is as follows:—

“ The condition of the schools of the County may be classed as fairly satisfactory. All sanitary defects are remedied immediately they

are discovered. New elementary schools were opened during the year at Cwmearn, Twmpath (Pontypool) and Argoed. All these are Infants' Departments. The new elementary school at Ynysddu and the new secondary school at Pontllanfraith were also completed. A new school is in course of erection at Markham Village. Other new buildings in course of erection for the Education Committee are the Mining School at Abersychan and the Agricultural Institution at Usk."

4. MEDICAL INSPECTION.

(a) *Scheme of Inspection.*

The Board of Education's schedule of medical inspection was followed during the year, viz. :—

- (i) All children on their first admission to Public Elementary Schools.
- (ii) All children on their attaining the age of eight years.
- (iii) All children on their attaining the age of twelve years.
- (iv) Special cases.
- (v) Re-examination of children found at previous inspections to have defects requiring attention.
- (vi) Examination of all mentally and physically defective children.
- (vii) Examination of children irregular in attendance at school (Attendance Officers' cases).
- (viii) Re-examination at school of children for whom spectacles have been prescribed at the School Clinic.

In addition special examinations were made of school children who had met with accidents upon school premises.

(b) *Steps taken to secure the early ascertainment of crippling defects.*

The Medical Officers in charge of the County Maternity and Child Welfare Centres notify the County Medical Officer of all children under five years of age suffering from crippling defects who are seen at the Clinics. The Health Visitors urge the mothers of any such children who may come to their notice to take the infants to the Centres.

All parents are given an opportunity of having the children examined by the Consulting Orthopædic Surgeon with a view to early treatment of suitable cases at the Royal National Orthopædic Hospital under the provisions of the County scheme.

(c) *Disturbance of School arrangements.*

At schools where there are Head Teachers' rooms there is practically no disturbance of school arrangements. At the majority of the schools a classroom is freed for the use of the medical inspector, the scholars being placed with another class for the time being. At single-roomed schools there must of course be some slight interference with the school routine work during medical inspections.

5. FINDINGS OF MEDICAL INSPECTION.

During the year a total of 13,997 children were examined at routine inspections. Of this number there were actually 1,498, or 10·7 per cent., children who were, at time of examination, physically fit,—boys 806, or 11·1 per cent., and girls 692, or 10·2 per cent.

A high standard has been fixed in classifying the children physically fit. A child found to have one carious tooth has been considered physically defective.

The number of special cases examined was 2,132.

Re-examinations were carried out in 9,732 cases.

The number of individual children inspected was 25,966, including 105 children specially examined owing to accidents upon school premises.

In addition the School Dentists examined 24,770 children.

Complete totals are given in the appended statistical tables.

(a) UNCLEANLINESS.

Clothing and Footgear at Routine Medical Inspections.

Year.	Unclean. Per Cent.	Ragged. Per Cent.	Excessive. Per Cent.	Insufficient. Per Cent.	Bad Footgear. Per Cent.
1911.	5·8	·4	·29	·09	·6
1912.	2·7	·5	·3	·05	·9
1913	2·8	·6	·4	·04	·1
1914.	2·8	·4	·3	·04	·9
1920.	·97	·3	·19	·05	·89
1921.	·42	·17	·07	·13	1·1
1922	·30	·32	·13	·31	1·1
1923	·38	·43	·05	·15	·98
1924	·14	·25	·03	·14	·80
1925	·13	·19	·09	·05	·51
1926	·25	·90	·05	·18	1·65

Dirty and Verminous Children.

The dirty and verminous children discovered at routine inspections are here tabulated for facility of comparison.

	HEAD.		BODY.		
	Nits. Per Cent.	Dirty. Per Cent.	Dirty. Per Cent.	Polices. Per Cent.	Pedicul. Per Cent.
Entrants—Boys	2.1	.39	1.4	2.2	.06
„ Girls	16.2	.07	1.1	4.1	.39
8—9 yrs.—Boys	3.2	.46	2.3	3.0	.09
„ Girls	20.1	1.45	1.4	4.7	.24
Leavers—Boys	2.4	.09	1.6	2.9	.04
„ Girls	19.7	.15	1.1	2.8	.15

The figures in practically every instance are slightly above those of last year.

A more comprehensive survey of the cleanliness of school children is made by the Health Visitors. They paid an average of 1.21 visits to each school in the County during the year when they examined all the children in attendance. Re-visits were paid to the schools after each cleansing examination to inspect the children previously found to have defects. The average number of visits paid to the schools is considerably under the standard set by the Board of Education, and it is impossible to increase the number of visits to the schools without augmenting the number of Health Visitors.

Altogether 56,244 children were seen at the cleansing examinations, and 7,409 defects as regards uncleanness, etc., were found—13.1 per cent. This percentage is the lowest for a number of years.

The defects, which include also minor ailments, are set out below and the figures for the two previous years are given for the purpose of comparison.

The number of individual children found unclean was 7,207.

Chief defects found.	1926.		1925.		1924.	
	No.	Per-centage	No.	Per-centage	No.	Per-centage
Nits of head (mild) ...	2155	3.7	2356	3.5	2501	3.7
Do. (bad) ...	1330	2.3	1171	1.7	1588	2.3
Body vermin ...	626	1.1	1087	1.6	1007	1.5
Dirty body ...	615	1.0	989	1.5	898	1.3
Ragged and dirty clothing ...	611	1.0	908	1.3	787	1.1
Insufficient clothing ...	112	.1	187	.2	143	.2
Excessive Clothing ...	10	.01	46	.06	37	.05
Poor footgear ...	398	.7	704	1.0	696	1.3
Poor nutrition ...	102	.1	134	.2	154	.2
Skin diseases ...	545	.9	636	.9	806	1.2
External eye diseases ...	58	.1	171	.2	439	.6
Otorrhoea ...	66	.1	135	.2	391	.5
Miscellaneous ...	781	1.3	1234	1.8	436	.6
Total defects ...	7409	13.1	9158	14.8	9,883	14.7

No. of children examined, 1926, 56,244; 1925, 65,815; 1924, 67,083.

The percentage of defects of uncleanness (apart from minor ailments) found by the Health Visitors during the year was 9.9 per cent., as compared with 10.8 per cent. for 1925, 11.3 per cent. for 1924, and 11.0 per cent. for 1923.

The parents were notified of the defects, and a re-examination of the children was made by the Health Visitors after a month's interval. 7,645 cases were re-examined, and 5,543 (72.5 per cent.) were found to have improved, and 2,102 (27.4 per cent.) to have not improved. The homes of the children who had shown no improvement were again visited, and instructions given to their parents or guardians in the methods of remedying the defect complained of. Further examinations were made of 6,987 children, and 3,943 (56.4 per cent.) were found to have improved by the time of this subsequent visit. 2,624 (37.5 per cent.) were undergoing treatment, and 420 (6.0 per cent.) showed no improvement, and no satisfactory promises of treatment were received from the parents or guardians. The homes of these children were again visited. In 1925, the figures were, further examined, 6,324; improved, 3,203 (50.6 per cent.); undergoing treatment, 2,628 (41.5 per cent.); no improvement, 493 (7.7 per cent.).

During the last few years there has been a decided increase in the number of children whose condition has been found to have improved between the time of the examination at school and the re-examination by the Health Visitors.

There were no legal proceedings taken during the year 1926. Fifty-three cases of neglect were referred to the local inspectors of the National Society for the Prevention of Cruelty to Children, who followed them up and took the necessary steps to ensure that the conditions were remedied.

(b) NUTRITION.

		1926.		1925.		1924.	
		Below normal.	Bad.	Below normal.	Bad.	Below normal.	Bad.
		Per Cent.		Per Cent.		Per Cent.	
Entrants	Boys	7.9	.9	8.9	.8	8.1	.03
"	Girls	7.2	.8	6.8	.7	5.8	—
8—9 period,	Boys	11.7	.9	12.6	1.1	13.7	.1
"	Girls	9.7	1.0	11.3	1.0	10.6	.08
Leavers	Boys	8.3	1.0	9.7	.8	11.3	.08
"	Girls	7.5	.6	10.5	.9	13.2	.06

The remedying of this condition occasions some difficulty to your Medical Officers. The essentials of good nutrition are sufficient sleep, fresh air and exercise, care of the teeth, wholesome food and regular sound habits. Given due attention to these details, a healthy development of body and mind generally follows. This is all a matter of home discipline,

and it is surprising to find how many parents fail in their duty to their children by laxity in these matters. They are simply bad habits, which are difficult to overcome, for when the undernourishment is so pronounced as to come to the notice of the School Medical Inspector, the habits have been formed; and although the health visitors advise the parents of the need of more sleep, regular and satisfying meals, etc., the old routine is extremely hard to break off.

Special investigations in other counties have shown that there is no clear indication that the nutrition of the child is directly associated with the income of the family. This seems a logical view to take, for a good deal depends upon the character and prudence of the home and the wise choice of nutritious foods which can be obtained even with a small purse.

(c) MINOR AILMENTS.

Routine inspections disclosed minor ailments in 7·7 per cent. of the children examined. Details of the nature of the minor ailments are given in the statistical tables appended.

There is need for the establishment of Minor Ailments Clinics in the industrial townships of the County, but a scheme to provide these would entail additional medical and nursing staff.

(d) NOSE AND THROAT CONDITIONS DISCOVERED AT ROUTINE INSPECTIONS.

Nose and throat conditions, discovered at the routine inspections are perhaps the most important of all, as by their persistence, other, and intrinsically far more serious conditions are liable to supervene.

The numbers per cent. are given where throat conditions were met with, tabulated as "Entrants," "8—9 years period," and "Leavers."

	No. Examined	Mouth Breathers	Enlarged Tonsils.		Adenoids		Tonsils and Adenoids	Conditions due to other causes
			Slightly	Much	Slight	Obstructive Adenoid Growth		
Boys—Entrants	2976	p.c. 2·5	p.c. 17·0	p.c. 2·9	p.c. ·8	p.c. ·06	p.c. 10·2	p.c. 2·0
Girls—Entrants	2777	2·0	20·8	2·5	1·0	·10	11·0	1·8
Boys—8·9 ...	2151	1·9	17·6	3·1	·9	—	6·6	1·9
Girls—8·9 ...	2057	1·6	19·3	3·2	·5	·04	7·6	2·7
Boys—Leavers...	2131	1·6	16·5	2·7	·7	—	4·6	3·2
Girls—Leavers..	1905	1·4	17·4	3·8	·6	·05	6·3	6·2

From the foregoing tabulated list it will be seen that a considerable number of children had affections of the nose and throat prior to their entering upon school life. The number of children with adenoids as well as enlargement of the tonsils has risen considerably this year.

The following is a tabulation of the percentages of glandular conditions discovered at routine inspections. The condition, especially that of the submaxillary and anterior cervical glands, is closely allied with, or secondary to tonsils and adenoids aetiologically, while the posterior cervical glandular enlargement is in many cases due to dirty, verminous or septic condition of the scalp.

		Submaxillary. Enlarged. Per Cent.	Anterior Cervical. Enlarged. Per Cent.	Posterior Cervical. Enlarged. Per Cent.
Entrants,	Boys	·6	·2	·3
„	Girls	·4	·1	·4
8—9,	Boys	·6	·6	·1
„	Girls	·3	·4	·09
Leavers,	Boys	·1	·1	·09
„	Girls	·1	·1	·05

(e) TUBERCULOSIS.

Tuberculous conditions were discovered in ·08 per cent. of the children examined at routine inspections. ·01 per cent. of the children inspected had pulmonary tuberculosis, and ·07 per cent. had tuberculous disease of bones or joints.

·15 per cent. of children inspected were suspected of being affected with pulmonary tuberculosis.

Of non-tuberculous chest conditions, 1·1 per cent. of the children inspected had catarrhal conditions of the lungs, while ·83 per cent. had chest trouble due to other causes.

These figures cannot be taken as a reliable incidence of tuberculosis in school children, as all children showing the least suspicion of the trouble are referred to the Tuberculosis Physicians. A statement of their findings is included later in this report.

(f) SKIN DISEASES.

Of the total children examined at routine inspections 3·5 per cent. were found to have skin diseases, due to:—

	Per Cent.
Ringworm of the Scalp	·16
Ringworm of the Body	·09
Scabies	·10
Impetigo	·91
Skin Diseases from other causes	2·3

Full details of the “ other causes ” are in the table dealing with the subject.

140 hair specimens were examined for ringworm microscopically at the County Laboratory, 87 being returned as positive and 53 negative.

X-Ray treatment for Ringworm is available for those cases which are likely to benefit by such treatment.

(g) EXTERNAL EYE DISEASES.

Disease of the external eye was discovered in 2·4 per cent. of the children seen at routine inspection, viz. :—

	Per Cent.
Blepharitis	2·0
Conjunctivitis	·44
Corneal Opacities	—
Keratitis	·01

while other diseases accounted for ·40 per cent. of external eye conditions in all children examined.

(h) DEFECTIVE VISION.

The children are normally examined as to their vision in the course of routine inspection in the two groups, eight years of age and 12 years of age respectively.

The “Entrants” are only examined as to vision with Snellen’s Type, where defect is evident or strongly suspected, or where a squint is perceptible.

For simplification, the results of routine examinations as regards defective vision, are tabulated. There is again this year a reduction in the number of cases. The table shows a slight increase in the number of squint cases.

Groups	No. of Children Examined	Only One Eye Defective				Cases where both Eyes were equally Defective		Cases of Unequal Error				Squint
		Right		Left				Right		Left		
		$\frac{6}{6}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{6}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less			$\frac{6}{6}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	$\frac{6}{6}$ to $\frac{6}{24}$	$\frac{6}{24}$ and less	
Entrants—Boys ...	2976	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.
„ Girls ...	2777	·10	...	...	·03	·47	·06	·03	..	...	·03	1·6
8-9—Boys *	2151	...	·03	·10	...	32	·07	·03	...	·03	...	1·6
„ Girls ...	2057	1·3	·69	2·6	·79	4·5	·97	1·9	·88	1·9	·88	1·2
Leavers—Boys ...	2131	3·0	1·1	2·6	1·0	5·4	1·8	2·6	1·0	2·7	·7	1·4
„ Girls ...	1905	1·6	·9	2·4	1·0	2·8	1·3	1·2	·8	1·0	·5	·70
„ Girls ...	1905	3·0	1·3	2·8	1·2	4·7	2·0	2·5	1·1	2·4	1·2	1·0

MYOPES.

The records of examinations of children at the Eye Clinics show that there are many children whose eyes are unfit to stand the strain of education in ordinary elementary schools. Some have to be excluded from school altogether, whilst others have to be taught orally.

The suitable method of dealing with these cases is by the establishment of "Myope Classes," to be held at the elementary schools, where the oral teaching and physical exercises given in the ordinary classes would be available for the children.

There are over a hundred children who would greatly benefit by instruction in Myope classes, but they are scattered throughout the County, and if classes were formed, rail or 'bus journeys would be necessary to obtain sufficient numbers to form a satisfactory class.

(i) EAR DISEASES.

The conditions discovered at routine inspection are given in percentages of numbers examined in each group. The percentage of defects is, on the whole, about the same as in the past few years.

		Number examined.	Otorrhoea. Per Cent.	Other Diseases. Per Cent.	Defective Hearing.
Entrants,	Boys	2976	1.1	.30	.50
"	Girls	2777	1.5	.32	.54
8—9 period,	Boys	2151	.74	.51	.51
"	Girls	2057	.58	.24	.53
Leavers,	Boys	2131	.51	.51	.42
"	Girls	1905	.99	.36	.73

(j) DEFECTIVE TEETH.

Apart from the inspections carried out by the School Dentist at the elementary schools, defective teeth were observed and noted during routine medical inspection.

The results are tabulated in percentages for numbers examined in each group.

		Number of defective teeth.		Dirty Teeth. Per Cent.
		Number examined.	Number under 4. 4 and over. Per Cent.	
Entrants,	Boys	2976	37.3	28.5
"	Girls	2777	44.3	27.5
8—9 period,	Boys	2151	46.4	28.0
"	Girls	2057	47.3	24.9
Leavers,	Boys	2131	48.3	9.2
"	Girls	1905	42.4	6.9

The number of children examined by the School Dentists was 24,770. Details will be found in the appended statistical table IV., group IV.

(k) CRIPPLING DEFECTS.

In the course of the routine inspections, 130 cases of deformities requiring treatment and 169 needing to be kept under observation, were discovered, an incidence for definite cases of 9·2 per 1,000 of children inspected. This figure does not indicate the total number of crippled children, an estimate of which is given later in this report.

6. INFECTIOUS DISEASE.

Head Teachers are provided with forms upon which they notify to the School Medical Officer and to the District Medical Officer of Health all cases of infectious disease which arise amongst their scholars. A health visitor, specially trained in infectious diseases, conducts any inquiries which may be necessary at the schools and homes.

Measles and Whooping Cough were only mildly prevalent during the year.

Several virulent epidemics of diphtheria arose and special attention was paid to the swabbing of contacts in the affected schools and examination of the milk and water supplies of the district, with a view to tracing the cause of the outbreaks.

The notifications received from Head Teachers were:—

Measles	...	...	224	German Measles	...	...	3
Whooping Cough	...	...	220	Ringworm	...	...	8
Scarlet Fever	...	...	111	Scabies	...	...	3
Chicken Pox	...	...	644	Impetigo	...	...	18
Mumps	...	...	573	Influenza	...	...	58
Diphtheria	...	...	79	Other Diseases	...	...	56
Total							<u>1,997</u>

During the year 2,935 swabs were taken by the School Medical Staff and examined for diphtheria bacilli at the County Laboratory, 17 schools being involved. The examination of the swabs gave 73 positive and 2,862 negative results.

When the diphtheria bacillus was found in a swab, the parents of the child were notified and advised to call in a medical practitioner; the child was excluded from school and the Medical Officer of Health of the area in which the child resided was notified. The positive cases were re-swabbed until two consecutive negative results were obtained.

There were in addition 18 specimens of urine, and 3 eye swabs from school children examined at the laboratory.

It was not found necessary to close any school departments on account of the prevalence of infectious or other diseases. Authority is now given to Head Teachers whereby registers need not be marked when, through the prevalence of infectious disease amongst the scholars, the percentage of attendance for any week falls below 60 per cent.

Certificates were given to 11 departments on account of the following conditions:—

Measles	...	...	...	3	Chicken Pox	...	...	...	5
Diphtheria	...	...	...	1	Mumps	...	...	...	1
Whooping Cough	...	...	...	1					

Disinfection of school premises is undertaken by the County Sanitary Inspector after every epidemic.

7. FOLLOWING UP DEFECTS DISCOVERED AT ROUTINE INSPECTION.

Re-examination of all children (whether of the routine inspection group or of the special examination group), found defective, is made by the Medical

Inspectors, and children who were referred for re-examination on account of doubtful signs are seen again.

The following table gives the number of re-examinations made by Medical Inspectors and the result thereof:—

Condition	No. of defects for which treatment was considered necessary.			No. of defects for which no report is available	No. of defects treated	Results of Treatment			No. of defects not treated	Percentage of defects treated
	Old Routine Cases.	Special Cases.	Total.			Remedied	Improved	No improvement		
Nutrition ...	1277	578	1855	456	1399	270	564	565	...	75.4
Uncleanliness { Head ...	210	79	289	82	150	69	52	29	57	51.9
{ Body ...	55	23	78	22	35	29	4	2	21	44.8
{ Dirty or Ragged ...	29	8	37	10	24	10	8	6	3	64.8
Clothing { Excessive ...	2	...	2	...	2	2	...	...	...	100.0
{ Insufficient ...	6	...	6	2	4	3	...	1	...	66.8
Poor Footgear ...	53	19	72	12	54	27	15	12	6	75.0
Skin { Ringworm { Head... ..	42	12	54	13	41	26	6	9	...	75.9
{ Body	12	6	18	5	13	13	...	...	...	72.2
{ Other Infectious Skin ...	104	28	132	18	114	106	5	3	...	86.3
{ Skin Diseases ...	183	74	257	68	189	95	38	56	...	73.5
Eye { Vision and Squint ...	1725	742	2467	716	1572	691	417	464	179	63.7
{ External Eye diseases ...	322	133	455	135	320	156	50	114	...	70.3
{ Otorrhoea ...	225	65	290	87	203	107	22	74	...	70.0
Ear { Defective Hearing ...	102	65	167	55	112	43	33	36	...	67.0
{ Wax ...	19	9	28	11	16	10	2	4	1	64.2
Nose { Enlarged Tonsils... ..	2508	529	3037	732	2034	407	402	1225	271	66.9
and { Adenoids ...	176	54	230	61	153	63	30	60	16	66.5
Throat { Tonsils & Adenoids ...	528	113	641	154	382	93	49	240	105	59.5
{ Other Diseases ...	532	193	725	165	560	193	142	225	...	77.2
Enlarged Glands ...	503	149	652	191	461	178	89	194	...	70.7
Defective Speech ...	91	58	149	40	109	23	46	40	...	73.1
Teeth ...	1733	491	2224	555	1521	511	427	583	148	68.3
Heart and { Heart Disease ...	783	210	993	281	712	190	76	447	...	71.7
Circulation { Anaemia ...	491	240	731	216	525	124	197	204	...	71.8
Lungs { Bronchitis ...	103	22	125	29	96	55	13	28	...	76.8
{ Bronchial Catarrh ...	404	129	533	131	402	220	76	106	...	75.4
Tuberculosis { Definite ...	2	17	19	13	6	...	3	3	...	31.5
{ Suspected ...	63	134	197	79	118	63	23	32	...	59.8
{ Other Forms ...	24	93	117	62	55	11	10	34	...	47.0
Nervous { Epilepsy ...	18	22	40	18	22	9	4	9	...	55.0
System { Chorea ...	11	24	35	9	26	13	9	4	...	74.2
{ Other Forms ...	46	31	77	27	50	13	18	19	...	64.9
Deformities ...	136	153	289	123	166	21	54	91	...	57.4
Other Diseases or Defects ...	821	427	1248	368	844	309	164	371	36	67.6
Totals ...	13339	4930	18269	4936	12490	4153	3047	5290	843	68.3

Number of children re-examined = 9,732 with 18,269 defects.

Defects of school children which require attention are notified by letter to the parents and 16,405 notices were forwarded during the year in regard to 15,911 children. The figures include defects notified by the Dental Surgeons, but not cleansing examinations. In these cases Health Visitors visit the homes of such children to point out to the parents the necessity of treatment, if this has not already been obtained. 6,147 defects were investigated at the homes by the nurses and the following information was elicited from the parents:—Actually receiving attention, 1,052; promised to obtain attention, 3,663, no satisfactory reply received, 1,432.

8. MEDICAL TREATMENT.

School Clinics.

There are ten School Clinics in the Administrative County, as follows:—

				Defects Treated.
Rhymney Cottage Hospital	...	...	...	Teeth, Vision, Tonsils, and Adenoids.
Nantyglo and Blaina Hospital	...	...	...	Ditto.
Pontypool and District Hospital	...	...	...	Ditto.
Crumlin, Hafodyrynys Road	...	...	...	Teeth and Vision.
Abercarn, The Surgery	...	...	...	Ditto.
Blaenavon, The Surgery	...	...	...	Ditto.
Tredegar, The Surgery	...	...	...	Ditto.
Pengam, Vine House	...	...	...	Ditto.
Newport, Stanley Road	...	...	...	Teeth, Vision, Tonsils, Adenoids and Minor Ailments.
Travelling School Clinic	...	...	...	Teeth and Vision.

Travelling Clinic.

The advantage which parents in the rural areas have taken of the facilities for treatment of defects of vision and teeth in their children, continues to justify the provision of the Travelling Clinic.

During the year 932 children were treated for defective teeth (1,728 attendances), and 145 children attended for correction of errors of refraction. Since the inauguration of the Travelling Clinic, 9,188 children have received the benefit of attention to these two defects, and it can safely be asserted that but for the provision of this Clinic the vast majority of these children would not have had the slightest treatment.

Payment Scheme.

The payment scheme, which was set out in the report for 1924, continues to operate.

The amounts received during the year 1926 were as follows:—

Treatment Received.	Amount Received.	Total amount still outstanding to be collected from parents.	
		£ s. d.	£ s. d.
Dental ... ..	... 46 5 0	5 14 6	
Tonsils and Adenoids ...	... 5 9 6	0 2 6	
Total	£51 14 6	£5 17 0	
Amounts received for 1924		£34 11s. 6d.	
Amounts received for 1925		£45 14s. 6d.	

The following Table shows the numbers treated at the Clinics during the year 1926.

Clinics	Number of Appointments made.	Number of Appointments kept.	Percentage of Appointments kept	NUMBER OF CHILDREN TREATED					
				Teeth.	Vision	Tonsils and Adenoids	X-Ray	Minor Ailments	
								Actual Cases	Visits Paid to Clinic
Abercarn	353	227	64·3	132	38	...	...	...	...
Blaenavon	586	427	72·8	226	101	...	...	...	...
Blaina	704	581	60·6	251	141	29	...	...	...
Crumlin	451	328	72·7	175	77	...	...	...	...
Pontypool	1068	711	66·5	336	170	33	...	...	...
Rhymney	415	230	55·4	101	66	23	...	...	...
Tredegar	308	206	66·8	57	120	...	...	...	...
Pengam	1144	763	66·6	402	124	...	...	...	...
Newport	2438	1669	77·4	266	329	134	35	276	664
Travelling Clinic ...	2042	1728	74·6	932	145	...	...	...	...
Totals... ..	9509	6870	72·2	2878	1311	219	35	276	664

(a) MINOR AILMENTS.

The number of children who received treatment for minor ailments during the year was 1,284. Of these cases, 276, or 21·1 per cent., were treated at the Clinic, Newport, and 1,008, or 78·8 per cent., by the parents' own medical attendants.

The Report of the Medical Officer in charge of the Newport Clinic, Dr. M. H. Gordon, is as follows:—

“The Minor Ailment Clinic is held on Wednesday mornings and every alternate Saturday morning. The attendance during the year has been very satisfactory on the whole, in spite of such adverse conditions as the industrial crisis.

The total number of cases treated at the Clinic was 276, compared with 201 of the previous year. There was a proportionate increase in the number of new cases and in the number of cases discharged cured.

Of the new cases seen during the year, one third suffered from otorrhœa (discharging ears); the remainder consisted chiefly of cases of blepharitis (sore eyes) and diseases of the skin. In each case of otorrhœa the parent was advised as to constant daily treatment, the method of procedure being carefully shown. The cases then reported at the Clinic at intervals till cured. Very resistant cases were referred for further advice to Dr. J. A. Lee, the Consulting Ear, Nose and Throat Surgeon.

Most of the blepharitis cases were cured after one or two visits to the Clinic; some were referred to the local doctor for continuance of the treatment.

The skin diseases seen at the Clinic were eczema, psoriasis, ring-worm and alopecia areata. The majority of the cases cleared up satisfactorily, but some of the cases of eczema were very resistant largely owing to want of cleanliness in the home and neglect on the part of the parents, and lack of attention to the daily dressings.”

(b) TONSILS AND ADENOIDS.

During the year, 2,220 children in whom nose and throat defects (routine and special cases) were discovered, were referred for treatment.

Pronounced cases are referred for immediate surgical treatment, but otherwise the procedure adopted is as follows:—

1. Where the amount of the obstruction is slight, but accompanied by a certain amount of mouth breathing and poor chest development, such children are not necessarily referred for operative treatment, but an

The following are particulars of the cases which received attention at the Minor Ailments Clinic during the year:—

	No. of Cases treated			No. of visits paid to Clinic	Results of Treatment.						No. of visits necessary to cure defects								
	Brought forward from last year.	New Cases	Total		Cured	Declined further appointment	Obtained treatment from local doctor	Still under treatment	Referred to Hospital	Referred for X Ray	1	2	3	4	5	6	7	8	9
Ringworm	1	20	21	55	1	2	...	3	...	14	...	...	...	...	...	...	...	...	...
Impetigo	2	1	3	4	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Seborrhœa	12	13	25	57	6	6	...	4	...	8	...	...	...	...	...	1	...	...	...
Eczema	1	5	6	17	4	...	...	1	...	1	...	...	...	...	...	...	...	...	...
Scabies	...	1	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Skin Diseases	6	9	15	45	6	1	...	8	...	...	...	...	...	...	...	...	...	...	...
Blepharitis	12	40	52	114	30	8	1	12	...	...	...	...	...	...	...	...	...	...	...
Conjunctivitis	1	1	2	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Corneal Ulcers	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phlyctenular Ulcers	...	2	2	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Eye Diseases	...	2	2	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Otorrhœa	28	77	105	293	39	14	...	50	...	...	...	13	11	7	4	3	...	...	1
Wax in Ears	...	3	3	5	2	...	...	1	...	...	...	1	...	1	...	...	...	...	...
Other Ear Diseases	4	6	10	31	1	1	...	5	...	...	...	...	...	...	...	...	...	...	...
Enlarged Glands	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Clinical examination only	1	30	31	38	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...
Totals	68	208	276	664	97	32	2	84	5	23	43	20	17	7	6	2	...	1	1

57 sessions were held, 929 appointments were made and 664 kept, a percentage of 71.4.

The Committee paid the rail fares on 471 occasions, at a total cost of £85 1s. 9d.

attempt is made with the co-ordination of the Instructors in Physical Training to improve the condition so that operative measures may be unnecessary.

2. When on subsequent inspection or inspections, the foregoing has proved to have had no beneficial effect, then these children are referred for operative treatment.
3. After operative interference the child is again examined, and is specially referred to the Instructors for training in breathing exercises. In many cases it is found that children persist in the mouth breathing habit even after the cause has been removed.
4. A few cases still persist as mouth breathers and in poor condition physically. In such it is often found that a nasal obstruction co-incident with the other condition causes the trouble on its own account. In such cases the child is referred for nasal treatment.

In a few cases it was found that the adenoids, owing to the persistence of the mouth breathing habit, developed again, and necessitated further treatment.

The following cases received attention at the County Tonsils and Adenoids Clinics, the operations being performed by Mr. J. A. Lee, the Consultant Ear, Nose and Throat Surgeon.

Name of Clinic.	NEW CASES.						RE-EXAMINATIONS.				No. of Sessions.
	No. of ap- points. made	No. kept.	Tonsils removed	Adenoids removed	Tonsils and Adenoids removed	Remarks.	No. of ap- points. made	No. kept	No. not kept	Satisfactory	
Blaina ...	35	29	...	...	29	...	...	...	...	...	3
Newport ...	195	135	...	...	134	1 deferred ...	...	...	...	...	18
Pontypool ...	31	33	...	...	33	...	...	...	...	...	3
Rhymney ...	36	23	...	...	23	...	...	...	...	...	3
Total	297	220	...	...	219	1 deferred ...	...	...	...	...	27

In addition to the above, 25 ear, nose or throat cases were specially examined and advice given by Mr. Lee at his consultation clinics.

The Committee paid the rail fares on 65 occasions at a total cost of £16 1s. 10d.

(c) TUBERCULOSIS.

Of the 25,996 children examined during the year (Routine, Specials and Re-examinations), 321 cases, or 1.23 per cent., were referred to the Tuberculosis Physicians of the King Edward VII. Welsh National Memorial Association for diagnosis and, if necessary, treatment.

The results of the Tuberculosis Physicians' findings are as follows:—

				Referred by Medical Inspectors.		Not so referred.	
				Males.	Females.	Males.	Females.
Diagnosed as Definite Cases:—							
Pulmonary	...	...	6	5	7	6	
Glands	...	...	11	7	9	7	
Other Forms	...	...	4	3	2	5	
			—	—	—	—	—
			21	15	18	18	
			—	—	—	—	—
No definite signs of Tuberculosis, but cases to be kept under observation							
	...	...	28	26	18	17	
Non-Tubercular	...	...	70	78	12	13	
Appointments not kept	...		14	6	—	—	
			—	—	—	—	—
			112	110	30	30	
			—	—	—	—	—

Total number of reports received, 395.

From the above table it will be seen that reports were received from the Tuberculosis Physicians upon 222 of the 321 cases notified to them and that 36 were definite cases in which Institutional treatment was indicated. The majority of these cases, together with some of the cases which were referred to the Tuberculosis Physicians in previous years and the cases which otherwise came to their notice were admitted to Hospital or Sanatorium during the year.

The following is the Tuberculosis Physicians' report in this connection:—

Admission to Hospitals and Sanatoria.

				Males.	Females.
Pulmonary	...	...	...	14	15
Glands	...	...	...	4	3
Other Forms	...	...	...	8	7
Suspicious Tuberculosis	...			2	5
				—	—
				28	30
				<u>28</u>	<u>30</u>

(d) SKIN DISEASES.

The parents of the 92 children suffering from Ringworm of the scalp were notified that treatment was required. 64, or 69·5 per cent., are recorded as having undergone treatment, of whom thirty-five, or 38·0 per cent., received X-Ray treatment under the Local Education Authority's scheme. They were treated by Dr. J. McGinn.

The report for the year is as follows:—

Number of Cases referred from 1925	Number of New Cases.	Number of Appointments made	Number of Appointments kept	Number Cured	Number Declined Treatment	Number still under Treatment	Number of Visits Necessary to Cure								
							1	2	3	4	5	6	7	8	9
7	28	156	136	14	5	16	...	4	2	..	1	2	3	...	2

The Education Committee paid the rail fares on 69 occasions at a cost £10 10s. 2d.

13, or 72·2 per cent., of the cases of ringworm of the body referred, were found to have been treated.

One chronic intractable case of scabies was treated at the Newport Minor Ailments Clinic.

Of other skin diseases referred, 49, or 16·8 per cent. were treated at the Clinic.

(e) EXTERNAL EYE DISEASE.

During the year 887 children were referred for treatment on account of external eye trouble. Of this number 320, or 36.3 per cent., followed the advice given and sought treatment, 56, or 6.3 per cent., of whom were treated at the Clinic. 264, or 29.7 per cent., made other arrangements.

(f) VISION.

For errors of refraction, squint, and other defects of vision, 3,555 children were referred for treatment. In 1,311 cases the offer of further investigation and if necessary, treatment at the Clinic, was accepted.

In 7.3 per cent. of the cases referred for treatment, parents made their own arrangements with private practitioners or hospitals.

Children for whom spectacles were prescribed at the School Clinics were re-examined at the next visit of the Medical Inspector to the School.

In some cases where there was a high error of refraction, especially if myopic in character, the children were periodically re-examined at the Clinic.

In cases where the error, especially if due to myopia, is a very high one, it is sometimes found necessary to exclude the child from school, so that the limited vision the child possesses shall be conserved.

In other cases it is found to be sufficient to advise the Head Teacher that it is necessary for the child to refrain from using the eyes for near work until otherwise advised.

Those of the Assistant School Medical Officers who have had experience in the correction of errors of refraction are in charge of the eye clinics and they deal with the majority of the cases which are examined. Children suffering from bad squint and severe defects of vision are referred to Mr. R. J. Coulter, the Consultant Ophthalmic Surgeon, who attends a Clinic at Newport once a week. Dr. Coulter examined 233 cases during the year.

The record of work accomplished at all the Clinics during 1926 is:—

Number of children examined:—

New cases	...	...	...	...	952
Re examinations	...	...	...	...	359
					<hr/>
					1,311
					<hr/> <hr/>

The number of appointments made was 1,764 and the number kept, 1,311, a percentage of 74·3.

Conditions found on examination:—

Defective Vision (one eye)	...	...	196
Defective Vision (both eyes)	...	...	636
Total Squints	...	...	82
Defective Vision and Squint	...	...	38
Myopia	...	...	63
Simple Myopia Astigmatism	...	...	27
Myopia and Myopia Astigmatism	...	...	68
Hypermetropia	...	...	153
Progressive Myopia	...	...	2
Simple Hypermetropia Astigmatism	...	...	135
Hypermetropia and Astigmatism	...	...	189
Mixed Astigmatism	...	...	81
Conjunctivitis	...	...	6
Blepharitis	...	...	12
Corneal Opacities	...	...	1
Amblyopia (one eye)	...	...	2
Photophobia	...	...	5
Nystagmus	...	...	1
Other forms	...	...	11
Conjunctivitis and Blepharitis	...	...	2
Phlyctenular Ulcers	...	...	2
Myopia Crescents	...	...	6

Action taken:—

New cases:—

Spectacles recommended	...	...	718
Spectacles not needed	...	...	234

Re-examinations:—

Change of spectacles recommended	...	...	275
No change necessary	...	...	84

Two children were excluded from school during the year for eye complaints as a result of examinations at the eye clinics.

Pairs of spectacles provided by Committee on account of poverty of parents, 478, with repairs to 33 pairs, at a cost of £134 10s. 3d.

Train fares of children and guardians paid by Committee on account of poverty of parents, 157 cases, at a cost of £19 14s. 5d.

Head Teachers were advised that children should do no near work in 9 cases.

Results of re-examination at School of children seen at Eye Clinics:—

	Cases in which parents defrayed expenses of visit to Clinic.	Cases in which Committee paid expenses.	Totals.
No. Examined ...	867	365	1232
Glasses worn and found to be satisfactory ...	227	92	319
Glasses requiring repairs ...	70	61	131
Glasses obtained but not worn on day of examination ...	63	50	113
Change of lenses necessary ...	2	...	2
Glasses not obtained ...	57	1	58
Vision improved, no need to wear Glasses ...	211	32	243
Referred for Re-Examination ...	224	119	343
Frames requiring changing ...	10	8	18
Glasses lost ...	4	2	6

It will be noticed from the above table that in 57 cases glasses were not obtained after prescriptions had been given. The provision by the Committee of free spectacles in necessitous cases has not only been of the greatest assistance to the child, but has proved a great economy in the time of the examining doctors.

(g) EAR DISEASE AND HEARING.

Treatment for ear disease was carried out at the Clinic, Stanley Road, Newport.

485 cases of ear disease were referred for treatment. Of this number 118, or 24·3 per cent. were brought to the Clinic. As will be observed in the tabulated list, otorrhœa is the most prevalent factor in ear trouble among the children, and it is essentially one that requires careful supervision in its treatment, otherwise regrettable sequelæ might follow.

77 cases of defective hearing were referred to the local medical practitioners.

(h) DENTAL DEFECTS.

The following table shows the dental work done during 1926:—

Clinic.	Number of Children treated.	Percentage of appointments kept.	No. of Fillings.	No. of Gas Cases.
Abercarn ...	132	62·5	118	95
Blaenavon ...	226	67·6	247	152
Blaina ...	251	82·5	218	225
Crumlin ...	175	71·9	152	106
Newport ...	266	62·8	264	198
Pengam ...	402	64·8	509	255
Pontypool ...	336	63·2	481	237
Rhymney ...	101	77·8	86	81
Tredegar ...	57	54·7	57	23
Travelling Clinic ...	932	84·4	1325	510
	2878	71·2	3457	1882

Train fares of children and guardians were paid by the Committee on account of poverty of parents in 29 cases at a cost of £2. 9s. 11d.

(i) CRIPPLING DEFECTS.

The following are the cases at present on the County Register between the ages of five and 16 years:—

Surgical Tuberculosis	...	...	...	50
Paralysis	...	...	...	184
Rickets	...	...	...	48
Congenital Deformities	...	...	...	178
Crippling caused through accidents, etc.				31

491

Mr. Arthur Rocyn Jones, F.R.C.S., the Consulting Orthopædic Surgeon, visits the Central Orthopædic Clinic, Newport, once a month for the purpose of examining new cases and re-examining children who have received treatment at the Royal National Orthopædic Hospital. The following cases were seen by him in the year.

NEW CASES.

Infantile Paralysis	...	...	16	Tubercular Knee	...	...	2
Deformities of Upper Limbs	...	...	7	Hemiplegia	...	...	1
Congenital dislocation of Hip	...	...	6	Drop Foot	...	...	1
Talipes Varus	...	...	6	Spinal Curvature	...	...	1
Cleft Palate	...	...	4	Deformity of Feet	...	...	1
Flat Foot	...	...	4	Spastic Paraplegia	...	...	1
Genu Valgum	...	...	3	Osteomyelitis	...	...	1
Poliomyelitis	...	...	3	Soft Palate and Cleft Uvula	...	...	1
Scoliosis	...	...	3	Weakness of Legs and Back	...	...	1
Talipes Valgus	...	...	3	Monoplegia	...	...	1
Pes Plano Valgus	...	...	2	Old Fracture of Leg	...	...	1
Pes Cavus	...	...	2	Miscellaneous	...	...	2
Tubercular Hip	...	...	2				
Dislocated Shoulder	...	...	2				
Torticollis	...	...	2				
				Total			79

Recommendations.

Admission to Royal National Orthopædic Hospital, Great Portland Street, London	...	...	...	...	...	21
Admission to Royal National Orthopædic Hospital, Country Branch, Brockley Hill	...	...	...	...	...	20
Splint and night shoes ordered	...	...	...	...	...	7
Boots to be altered	...	...	...	...	...	15
Massage or electricity treatment at Newport Clinic	...	...	...	...	...	6
Referred to Welsh National Memorial Association	...	...	...	...	...	1
Referred for X-Ray examination	...	...	...	...	...	1
Artificial Leg recommended	...	...	...	...	...	1
Re-examine	...	...	...	...	...	1
No Treatment required	...	...	...	...	...	6
						79

In addition, 29 children previously seen by the Consultant Orthopædic Surgeon were re-examined at the Newport Clinic.

Nine children of school age were at the Royal National Orthopædic Hospital, or its Country Branch at Brockley Hill, on the first day of the year, and 17 new cases were sent there during the year under the scheme whereby 12 beds have been retained for crippled children (of school age and under that age) of this County.

The defects from which these 17 children suffered were:—

Talipes Equino Varus	...	...	...	4
Deformity of Forearm	...	...	...	1
Poliomyelitis	...	...	...	2
Congenital dislocation of Hip	...	...	...	2
Right Hemiplegia and Talipes Equino Varus				1
Birth Palsy—upper limb	...	...	...	1
Scoliosis	...	...	...	1
Hemiplegia	...	...	...	1
Osteomyelitis	...	...	...	1
Old Tubercular Knee	...	...	...	1
Cleft Palate	...	...	...	1
Rickets	...	...	...	1

17

On the last day of the year there were nine school children at the hospitals.

Upon their discharge from the Orthopædic Hospital the County Medical Officer takes charge of their after care. He sees them periodically at the Central Orthopædic Clinic, Newport, and supervises massage and electrical treatment, when this is necessary. A close watch is kept upon the surgical boots and instruments which have been supplied to the children, to see that these are worn constantly and continue to be suitable. Seventy-four examinations were made by him during the year.

Twenty-one children attended the Clinic for massage and electrical treatment during the year, making 162 attendances.

Fourteen surgical boots, two walking instruments and eleven other surgical appliances for physically defective children were supplied by the Committee. Alterations to boots and instruments were made in twenty cases.

Owing to the industrial dispute, which lasted for seven months of the year, only 10/6 was received from parents towards the cost of these appliances.

Fifteen children with surgical tuberculosis were treated at the hospitals of the Welsh National Memorial Association.

Two district orthopædic clinics were opened during the year—one at Crumlin and one at Pengam, school clinics at these places being utilised for this purpose.

It was intended that a special report upon the orthopædic department and its work should be written up, but owing to the outbreak of Small Pox in the County this report has had to be deferred. It will be supplied at the earliest favourable opportunity, and the Medical Officer is confident that it will afford the Committee much satisfaction that they have undertaken this work, for some remarkable cures have been effected.

9. OPEN-AIR EDUCATION.

The provision already made for open-air education was continued during the year. It is to be regretted that the financial condition of the County has not permitted any extension of this valuable work.

(a) *Playground Classes.*

In fine weather playground classes are arranged at most of the Schools where facilities are available.

(b) *School Journeys.*

These are part of the curriculum of every School and take the form of a Nature Study lesson.

(c) *School Camp.*

Under present financial conditions the institution of a school camp is not possible.

(d) *Open-air Classrooms.*

Open-air classes were held at four of the Authority's Schools, and consisted of six departments, viz.:—

School.	Department.	No. selected from school for open-air class.		
		Boys.	Girls.	Total.
Aberbargoed	Mixed ...	—	40	40
Libanus (Blackwood)	Mixed ...	18	16	34
Do.	Infants ...	6	5	11
Pentwyn	Mixed ...	11	15	26
Do.	Infants ...	12	10	22
Tynywern (Trethomas)	Mixed ...	17	17	34
Totals		64	103	167

It was not possible to utilise the Open-air Classrooms at Pontllanfraith, Cefn Forest, Glanhwy, Cwyddon, and Phillipstown owing to the demands for additional accommodation at the Schools for elementary education.

The advantages of these classrooms to weakly children are so great that steps should be taken to increase the ordinary accommodation rather than commandeer any of the few rooms that are suitable for the purpose.

The reports of the Medical Officers in charge of the classrooms are as follows:—

ABERBARGOED:—DR. A. ROBERTS.

The maximum accommodation here is the same as last year—40, and the number on the roll is at present 40. The average attendance was 33, and the number of pupils present on the day of examination was 32. The children are selected from those attending the girls' department of Aberbargoed School and are all over the age of seven years. Those chosen are usually children who are decidedly underweight or who have enlarged glands or any other condition which is suggestive of the pre-tubercular stage. It is satisfactory to note that practically every child who had been in the department since the last inspection had gained in weight and that there now seems to be very little opposition on the part of the parents to their children being put in the open-air department. Several girls were well enough to be transferred back to their ordinary classes and there was little difficulty in getting others to fill their places.

PENTWYN:—DR. M. M. PROUDFOOT.

There are two open-air classrooms in this school, one in the Infant Department, and one in the mixed.

At the end of the year there were 22 children in the Infant classroom and 26 in the Mixed. The children selected for the open-air department are those suffering from malnutrition, anæmia, enlarged tonsils, etc.

At the last Medical Inspection the children were all found to be making satisfactory progress. They are weighed and measured regularly every month. All had gained steadily in weight with the exception of two children who had lost a little during the last month, but this loss in weight was no doubt due to an attack of Influenza which these children had recently. In both classes a few were found fit to be transferred to their ordinary class.

It is very interesting to note that during the recent influenza epidemic the attendance in both open air classes was better than in any other class in the school.

The children seem very happy in the open-air department and the cup of milk or cocoa in the middle of the morning is proving beneficial.

LIBANUS :—DR. P. R. WHITAKER.

There are two open-air classrooms in this school, one in the Infants' Department, and one in the Mixed. Both departments are kept at their full capacity, vacancies being filled in order of "merit."

The children chosen for these departments are those who by reason of some defect are below the health level of the average school child, i.e., cases of heart disease, bronchial catarrh, enlarged tonsils, anæmia, etc. The surroundings, the modified work and hours are of great benefit to these children, especially during the first three or four years of school life.

During the year four cases have been transferred to the ordinary class room.

TINYWERN :—DR. P. R. WHITAKER.

In this school, there is only one open-air classroom. The number in the class consists of 16 girls and 15 boys. The children are selected as in previous years, and vacancies filled at the Routine Medical Inspections.

The children, with one exception, show a decided improvement in their general condition. The prejudice against the open-air class does not seem so prevalent in this district, the majority of the parents being glad to have such accommodation provided for their delicate children.

10. PHYSICAL TRAINING.

The School Medical Service is closely co-ordinated with the work of physical training in the Schools and the Assistant School Medical Officers have been instructed to note all children who are likely to derive benefit from a course of physical exercises. These cases as they arise are referred to the County Organisers of Physical Education, Mr. F. Johnston and Miss E. A. John, who make the necessary arrangements for the children to receive instruction.

The joint report of the Organisers is as follows:—

"The actual period covered by Mr. Fraser Johnston was from May, 1926, and that by Miss B. John from September, 1926. During the period under review, visits were made by us to the Schools as follows:—

Mixed Departments	...	...	305
Boys' Departments	...	...	34
Girls' Departments	...	...	29
Infants' Departments	...	...	77
Secondary Schools for remedial cases			11

In addition, 10 visits were made to Swimming Baths for the purpose of organising instruction and giving assistance. In connection with the organisation of School Sports, six meetings were attended, and assistance was given at four School Sports; this state of affairs was unsatisfactory, but owing to the industrial difficulties many Sports and Swimming Events were held in abeyance; it is hoped that 1927 will be more successful.

Every teacher, as yet, has not grasped the spirit of the Board's Syllabus, and some still cling to the old uniformity of the past. Our efforts in creating the right atmosphere and introducing the enthusiastic element have, in the main, met with success.

Time given to the Subject. Since we took up our duties with your Authority the time allotted to Physical Exercises and Organised Games has increased slightly, and although in a few instances inadequate, it is pleasing to report that on the whole the tendency is to follow the recommendation of the Board's Syllabus and give a daily lesson of 20 minutes, or a minimum of three periods per week with an additional organised games period once a week.

It can readily be understood that a short period physical training lesson, taken daily, is of greater value than twice or three times weekly, even though the latter may be of longer duration.

Accommodation. The teachers as a body are willing and open to suggestions, but in many schools there is a scarcity of accommodation; whenever possible the lessons are taken out of doors, but in wet weather many difficulties present themselves owing to limited shed space. There is no reason why a classroom lesson should not be given at such times. Every assistance has been given by demonstrating such lessons, and although the accommodation is restricted, this need not form an excuse for neglecting the lesson entirely.

Central Halls. It is regrettable that central halls which ought to be available for Physical Training during wet weather are almost invariably permanently occupied by several classes. Whenever practicable a spare classroom would serve for the indoor physical lesson, this room could be kept well ventilated and as free from dust as possible. Much demonstration work has been done where halls and classrooms were available.

Dress and Footwear. Owing to the industrial difficulties many children had to forego the benefits of this branch of training because of poorness of dress and footwear, despite this fact, boots and clothes were frequently provided, thanks to the teachers generally and other agencies. As the Physical Lesson encourages activity, as far as boys' classes are concerned, coats and

collars should be removed; as much freedom as possible should be the object; the use of rubber and other pliable soled shoes has been encouraged.

Playing Fields, Games and Apparatus. It is encouraging to be able to report that many schools provide an Organised Games period and make use of open spaces within reach of the school. Greater progress and variety in organised games can be made on surfaces of a yielding nature: the usual playground surface is a poor substitute for open spaces and fields. We have assisted in preparing junior games leading up to senior team work; encouraged the permanent marking of pitches, to save time, pointed out advantages of keeping permanent score cards and charts to maintain a keen competitive spirit.

In some schools there is a tendency to devote too much time to games during the physical training lesson. A proper lesson consists of a definite series of exercises, chosen according to the age and ability of the class, and also a game. Games alone do not constitute a proper physical lesson, there being no specific effect.

Apparatus, in many cases, is very poor, the use of coloured tapes, old tennis balls, skipping ropes, footballs, bean bags and poles, is absolutely a necessity for effective carrying out of the subject. Many schools are gradually collecting these things.

The House System is successfully run in many schools; we have given many demonstrations of games and competitive events suitable for this system, and encouraged the formation of houses in other schools.

Athletic Organisation. The Rugby and Association Football Leagues still exist in the County. Every credit is due to those teachers who spend their leisure time organising these leagues and furthering the interests of the boys in the different competitions.

The few School Sports which were held were well organised and the children taking part derived great benefit in many ways.

Circulars. Circulars dealing with different aspects of the subject have been left and sent round the schools; "List of Important points to be observed during the Physical Training Lesson," "List of Breaks," or game like forms of exercises, "Organised Games" suitable for local conditions, "Exercises for special purposes."

Open-air Classes. Adapted and modified Syllabus exercises have been taught in these classes. Every encouragement has been given to respiratory

exercises, sitting and standing positions and the correction of faults during additional lessons.

Remedial Exercises. The cases on the list referred by the Medical Inspection Department have received attention. There were 114 cases of children suffering from postural and other defects.

The method employed when dealing with these cases is as follows:—The child is inspected in school and put through special exercises according to the defect, in the presence of the Head Teacher; an illustrated chart of the specialised movements is sent to the Head Teacher who passes it on to the parents. Consistent systematic daily performance is absolutely necessary to effect a cure; at subsequent visits to the schools the children are seen again and “ follow up ” exercises are given. We think that this method will prove more effective than doing the exercises in the classroom.

By systematic co-operation with all teachers we feel that the physical standard of the children will continue to improve, and through this channel, the mental, moral and emotional sides of their natures.

Dancing. Country and Folk Dancing, as a branch of physical training, maintains its popularity. During the year, competitions were held at Chepstow and Magor for the “ Lawrence ” and “ Clifford Thomas ” Shields, at Pontypool for the “ Trevethin ” shield; in all 42 teams competed from schools in the County.

The competitions are usually for “ children attending the Elementary Schools,” but at the Chepstow Festival the “ Lawrence ” shield is for girls only.

In conclusion our sincere thanks are due to the Director of Education for his encouragement and assistance.

Thanks are due to Head Teachers and Assistants for their readiness to accede to requests and to accept suggestions.”

11. PROVISION OF MEALS.

The following report of the Director of Elementary Education is submitted:—

1.—Introduction.

Prior to the industrial dispute which commenced on 1st May, 1926, industrial depression had already affected certain parts of the County. It was obvious from the commencement of the dispute that it would soon be

necessary to provide meals for necessitous school children, and the initial arrangements were immediately proceeded with. On 4th May, 1926, the Education Committee resolved "That the Director be authorised to put into force the Education Act, 1921, as to the feeding of children attending the Elementary Schools, whenever and wherever he found it necessary."

2.—Organisation.

Past experience has proved that the most efficient way of carrying out this work is to keep it under the direct control of the Education Committee. The County was accordingly divided into "Feeding Areas," each area being placed under the charge of a Domestic Arts Teacher, who was solely responsible for ordering all provisions, supervision of cooking, and for certifying Trademen's accounts. Head Teachers and Teaching Staffs, with assistance, arranged for the preparation and distribution of meals, and for the registration of scholars' attendances at the Feeding Centres. In one or two cases it was found possible to arrange for the children from all schools in a District to attend at one Central Feeding Centre, but distance prevented this being arranged in every area. From the outset the organisation worked smoothly, for the Committee have found it necessary to feed scholars many times during the past few years, and the experience previously gained proved of great value during the present period.

3.—Period of Feeding.

The provision of meals commenced generally on 17th May, 1926, but having regard to the existing conditions, meals were provided in the Nantyglo and Blaia, Rhymney, and Blaenavon Districts from the 14th May, 1926. In view of the many districts in which feeding had discontinued as a result of the withdrawal of scholars, the Elementary Committee decided to discontinue the provision of meals as from 23rd December, 1926. Throughout all school holidays during this period, the provision of meals continued, members of the teaching staffs undertaking the supervision of the work according to a rota prepared by Head Teachers.

4.—Application Forms, Income Test, and Guardians Deductions.

To comply with the Board of Education Grant Regulations it was necessary to apply an income test in all cases where parents desired their children to be supplied with meals. Parents were requested to complete an application form on which particulars of the family circumstances had to be entered, and on receipt of the form by the Head Teacher the following Income Test (adopted by the Committee in December, 1925) was applied:—

	£	s.	d.
Man and Wife (10/- each)	1	0	0
Children (each child 5/-) maximum	1	0	0
	<hr/>		
	£2	0	0
	<hr/>		

The application of this income test resulted in the exclusion of a number of children during the first week, but for some time after the numbers remained unaltered. A further drop in the numbers resulted from deductions made in the relief granted by Boards of Guardians. Where scholars were provided with meals by this Authority, Guardians deducted 1/- weekly in respect of each child from the relief granted to the parents. In many cases parents decided it was preferable to obtain the maximum relief, and to provide their children with meals at home. As a result the number of individual scholars fed was reduced, and in some areas the feeding discontinued altogether, e.g., in Rhymney Town no meals were provided after the 10th July.

5.—Ordering Provisions and Payment of Accounts.

Domestic Arts Teachers were instructed to distribute, as far as possible, the orders amongst the tradesmen of the district, and to buy quantities as large as conveniently possible, thus securing the benefit of price reductions. After obtaining tenders from various tradesmen, this procedure was adopted, each tradesman being given an order for at least a week's supply. Realising the position of the traders, arrangements were made to pay all accounts weekly. This method placed considerable extra work on the office staff for over 19,000 separate accounts had to be checked, and cheques drawn. Each account was carefully scrutinised, both as regards correct calculation, and also as regards reasonableness of price, and as a result a considerable saving was effected.

6.—Meals and Cost.

The Committee's Dietary, drawn up after consultation with the County Medical Officer and Domestic Arts Teachers is as follows:—

Dinner.

Monday	...	...	...	Irish Stew, Bread.
Tuesday	...	...	...	Bread and Butter, Suet Pudding with Syrup, or Rice and Milk.
Wednesday	...	...	...	Lentil Soup (stock basis), and Dumplings.
Thursday	...	...	...	Beef Sandwiches and Cocoa.
Friday	...	...	...	Pea Soup and Bread.
Saturday	...	...	...	Bread and Cheese; Green Sandwiches and Milk.

This dietary, with slight variation, was in operation during the period of feeding. Until 26th July, one meal daily (dinner) was supplied for six days each week, but subsequently it was found necessary to provide breakfasts in the following districts:—

Pengam	Victoria
Fleur-de-lis	Abersychan
Varteg	Cwmffrwdor
Garndiffaith	Pontypool

During the whole period 646,567 meals were provided to approximately 8,000 individual scholars. The approximate cost is:—

Food only	...	...	...	£7,730
Payments to Caretakers	...	...	...	£831
Utensils, etc.	...	...	...	£40
Coal	...	...	...	£60
			—————	£8,661
Cost per meal for food only	...	...	...	28d.
Total cost per meal	...	...	...	3d.

7.—Conclusion.

Throughout the whole period it has been the endeavour of the Director to supply a substantial and nutritious meal to all necessitous school children, and at the same time to keep the cost as low as possible. The cost per meal, viz., 3d., or 28d. for food only compares very favourably with that of other Authorities, and it is believed is generally lower. This has been possible by the close co-operation of members of the Committee, Teaching Staffs, Domestic Arts Teachers, and Office Staff. A considerable saving was effected inasmuch as only a small sum had to be expended on the purchase of boilers, utensils, etc. Boilers purchased by the Director in 1921 at very advantageous prices were available, and the best thanks of the Committee are due to the many “places of worship,” who permitted the use of their tea urns and other equipment. A large amount of outside voluntary help was available.

That the work has been carried out in such a satisfactory manner is due to the valuable assistance that has been rendered to the Director by the Teaching Staffs and Domestic Arts Teachers. Although considerable extra work has fallen on the office, no additional assistance has been engaged, though it has frequently been necessary to work extra hours in the preparation of Returns, etc., required by the Board of Education and in checking Tradesmen’s accounts.

PROVISION OF FOOTWEAR.

During the period of the Dispute, a very large number of pairs of boots has been supplied to children in attendance at the Elementary Schools from Funds raised by various bodies. Altogether over 9,300 pairs of boots and shoes, various articles of clothing, and repairs to footwear have been executed. From information obtained it has been ascertained that the following have contributed liberally towards the supply of these goods:—“ Save the Children ” Fund, Teaching Staffs, Local Distress Committees, Trades and Labour Councils, County Hall Staff, Colliery Officials.

12. SCHOOL BATHS.

There are no facilities for school baths.

13. CO-OPERATION OF PARENTS.

Parents are invited to and welcomed at all medical inspections and it is gratifying to note that they avail themselves of the opportunity in satisfactory numbers. The inspecting Medical Officers have become known to the parents through the medium of the local Eye, Dental and Infant Welfare Clinics, and their advice in regard to the children's health is eagerly sought.

14. CO-OPERATION OF TEACHERS.

The valuable help afforded by Head Teachers and their Assistants continues. They are called upon to assist very largely in the arrangements for the inspections, making a return of the children eligible for examination, preparing the cards of new cases, weighing and measuring the children, notifying the parents of the date of the inspection, and arranging a room for the use of the inspector.

The latter function is very often the cause of considerable inconvenience to the Head Teachers, for in only a few of the schools of the County is there a room to spare for the inspection. Yet they are always courteous and willing to oblige.

Practically the same routine is followed with the visit of the School Dentist, the exceptions of course, being the weighing and measuring of children and the notification of parents.

In many other ways the teachers are of assistance. They attend at the inspections and give information to the doctor from their own observation of the children, which is of value in the diagnosis of difficult cases. Their influence with the parents is of great service when the question of treatment of defect arises.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

There is very active co-operation between the Medical Inspectors and the School Attendance Officers. The Superintendent Attendance Officer writes each week to the Attendance Officers in whose districts the Medical Inspector is due to visit, instructing them to arrange that any absentees on the ground of ill health shall meet the Inspectors at the Schools. In addition, many special visits are paid to the schools for the purpose of examination of cases referred by the Attendance Officers. Medical certificates are given to the officers for production to the Magistrates and occasionally the Medical Inspectors attend Police Courts to tender evidence in school attendance prosecution cases.

16. CO-OPERATION OF VOLUNTARY BODIES.

There are at present no voluntary bodies in the Administrative County interested in the welfare of school children, with the exception of the National Society for the Prevention of Cruelty to Children. The three local Inspectors of the N.S.P.C.C. work in hearty co-operation with this department, and all cases referred to them receive prompt and effective attention. The bulk of the cases referred to the Society are verminous and neglected children. Fifty-three cases were referred to the Society in the year 1926.

17. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

By powers conferred on the Education Authority under the Elementary Education (Defective and Epileptic Children) Act, 1899, a number of children are maintained at Special Schools.

They are as follows:—

Blind—

Royal Normal College, London	...	...	2
Swansea Institution for the Blind	...	...	17
West of England Institution for the Blind	...	...	1

Deaf and Dumb Institutions—

Swansea	...	...	...	...	...	11
Derby	...	...	...	...	...	5
Margate	...	...	...	...	...	1
Bristol	...	...	...	...	...	3
Homerton School, Bucks	...	...	...	...	...	1
Oral School for Deaf, Cardiff	...	...	...	...	...	1

Mentally Defective—Attending Certified schools for						
Mentally Defective children, Feeble-Minded	...					2

Epileptic—Attending Certified Special Schools for						
Epileptics	...	...	...	...	...	2

Particulars of the numbers of children in these classes are given in the statistical tables at the end of this report.

Blind.

There were at the end of the year seven blind children not at a special school or institution. Of these, one was awaiting a vacancy at Swansea Institution at that time, whilst one was under the age of seven years. There is difficulty in obtaining admission to institutions for this class of child. In the other five cases efforts are being made to persuade the parents to allow the children to be admitted to an Institution.

There are nineteen partially blind children not in institutions. Three of them were awaiting vacancies at the end of the year, three were too young for admission, and one was also mentally defective. The parents' permission was awaited in three cases, while the remaining nine cases were not suitable for a Blind Institution.

Deaf and Dumb.

Fifteen deaf and dumb and 24 partially deaf and dumb children suitable for institutional training had not been sent away, the reasons being as follows:—

Wholly Deaf:—Parents unwilling, four; awaiting admission at end of year, three; not suitable for institutions, two; replies awaited from parents, six.

Partially Deaf:—Parents refused, one; awaiting replies, 2; too young for institutions, 2; children showing signs of improvement, 13.

Action is taken to force unwilling parents to send their children to an institution, when circumstances warrant that course.

Mentally Defective.

There are 290 known mentally defectives between the ages of five and 16 years, and 29 (severe) and 30 (mild) epileptics.

In accordance with the suggestion contained in Circular 1349 of the Board of Education, dated 12th January, 1925, arrangements have been made for the supervision of these children by the Inquiry Officer of the County Mental Deficiency Committee, in conjunction with her duties under the Mental Deficiency Act, 1913.

The epileptic child is another type for which the provision of Special School education is difficult by reason of the shortage of accommodation.

Cases of mental deficiency, idiots and imbeciles, and defectives who by virtue of age cease to come under the jurisdiction of the Education Committee are referred to the County Mental Deficiency Committee under the Mental Deficiency Act, 1913.

One feeble-minded boy and three girls, 15 imbeciles (10 boys and five girls), and five idiots (two boys and three girls) were notified to the County Mental Deficiency Committee by the Education Committee during the year.

There is a shortage of accommodation at Special Schools for mentally defective children, although there are many who would benefit by such training. No further progress has been made in regard to the Special School for Mentally and Physically Defective Children which it is proposed to erect at Caerleon. Financial considerations appear likely to hold up the matter indefinitely.

Mental Defectives under School Age.

At present where the deficiency is evident, the children are observed and note of them made either (i) by the Medical Officers at Maternity and Child Welfare Centres, or (ii) by Health Visitors when visiting the homes in their respective districts.

18. NURSERY SCHOOLS.

No Nursery Schools are in existence in this County.

19. CONTINUATION SCHOOLS.

Medical inspection of pupils attending these schools has not been commenced.

20. CHOICE OF EMPLOYMENT.

No call upon the services of the County Medical Officer under the Education (Choice of Employment) Act, 1920, was made during the year.

21. SPECIAL INQUIRIES.

No special inquiries were conducted during the year.

22. MISCELLANEOUS.

The following candidates for the teaching profession, etc. were examined by the School Medical Inspectors during the year:—

Technical Free Student Teachers	...	...	4
Student Teachers	...	...	1

Seven Teachers and one School Cleaner, absent from duties through illness, were also examined.

2. SECONDARY SCHOOLS.

The medical inspection of pupils attending secondary schools in the County was commenced in March, 1921. The pupils at the following schools come within the scheme of inspection:—

Abergavenny County School (Girls).
 Abergavenny Grammar School (Boys).
 Abertillery County School (Boys and Girls).
 Ebbw Vale County School (Boys and Girls).
 Newbridge Secondary School (Boys and Girls).
 Pontllanfraith Secondary School (Boys and Girls).
 Pontypool County School (Girls).
 Pontywaun County School (Boys and Girls).
 Tredegar County School (Boys and Girls).
 Maesyccwmer Secondary School (Boys and Girls).
 Abersychan Secondary School.
 Chepstow Secondary School (Boys and Girls).
 Nantyglo Secondary School (Boys and Girls).
 Rhymney Secondary School (Boys and Girls).

The general scheme of inspection being carried out is:—

- (i) Examination of all children upon admission, the character of the examination to depend upon the date of the last examination made in the Elementary School.
- (ii) Full examination of all children at 12 years of age.
- (iii) Subsequent to the age of 12, yearly examination, the degree and extent varying according to the previous record and other circumstances of the child.
- (iv) At the age of 15 a full routine examination to be made of each pupil, and the annual re-examination to continue so long as the pupil remains at School.

A visit of the School Medical Inspector is made each term. A male medical inspector examines boys and a lady inspector the girls. The instructions given to the School Medical Inspectors embody all the suggestions set out in the Memorandum of the Board of Education dealing with this subject.

Power is given to the Committee to extend to pupils of Secondary and other schools under this section of the Act the facilities for treatment which are already available for Elementary School children, viz.:—

Examination of eye defects and the provision of spectacles.

Dental inspection and treatment.

Operative treatment of tonsils and adenoids.

Treatment of minor ailments and defects (e.g., skin diseases, running ears and sore eyes).

Remedial exercises.

It has been decided that such treatment shall be available for Secondary pupils at the Committee's School Clinics. The Higher Education Committee has approved the same scale of charges as has been fixed for Elementary School children and which was detailed in the report for 1924.

Table showing the number of re-examinations made by Medical Inspectors and the result thereof :—

Condition	No. of defects for which treatment was considered necessary.			No. of defects for which no report is available	No. of defects treated	Results of Treatment			No. of defects not treated	Percentage of defects treated
	Old Routine Cases	Special Cases	Total			Remedied	Improved	No. improved		
Nutrition ...	71	...	71	20	51	10	22	19	...	71.8
Uncleanliness { Head ...	13	...	13	3	7	6	1	...	3	53.8
{ Body ...	1	...	1	1	...	...	...	...	...	...
Clothing { Dirty ...	...	...	...	...	...	...	...	...	...	...
{ Excessive ...	...	...	...	...	...	...	...	...	...	...
{ Ragged ...	...	...	...	...	...	...	...	...	...	...
Poor Footgear ...	1	...	1	...	1	1	...	...	...	100.0
Skin {	Ringworm { Head ...	...	...	...	...	...	...	...	...	...
	{ Body ...	1	1	1	...	...	...	...	...	...
	Scabies ...	1	1	...	1	1	...	...	...	100.0
	Impetigo ...	1	1	...	1	1	...	...	...	100.0
{ Other Diseases ...	13	...	13	1	12	4	5	3	...	92.3
Eye { Vision ...	177	...	177	50	96	55	20	21	31	54.2
{ Squint ...	11	...	11	2	8	4	1	3	1	72.7
{ External Eye disease ...	14	...	14	6	8	1	2	5	...	57.1
Ear { Otorrhoea ...	15	...	15	6	9	5	2	2	...	60.0
{ Defective Hearing ...	11	...	11	4	7	1	4	2	...	63.6
{ Wax ...	...	...	...	...	...	...	...	...	...	...
Nose { Enlarged Tonsils ...	98	...	98	28	62	9	23	30	8	63.2
and { Adenoids ...	6	...	6	3	3	1	...	2	...	50.0
{ Tonsils & Adenoids ...	18	...	18	3	11	6	...	5	4	61.1
Throat { Mouth Breathing ...	...	...	...	...	...	...	...	...	...	...
{ Other Diseases ...	26	...	26	8	18	5	5	8	...	69.2
Enlarged Cervical Glands ...	33	...	33	13	20	8	12	...	...	60.6
Defective Speech ...	17	...	17	6	11	2	4	5	...	64.7
Teeth ...	187	...	187	68	67	30	25	12	52	35.8
Heart and { Heart Disease ...	75	...	75	26	49	9	14	26	...	65.3
Circulation { Anæmia ...	56	...	56	19	37	10	11	16	...	66.0
Lungs { Bronchitis ...	3	...	3	...	3	2	...	1	...	100.0
{ Bronchial Catarrh ...	7	...	7	5	2	1	...	1	...	28.5
Tuberculosis { Definite ...	...	...	...	...	...	...	...	...	...	...
{ Suspected ...	5	...	5	1	4	1	2	1	...	80.0
{ Other Forms ...	4	...	4	3	1	...	...	1	...	25.0
Nervous { Epilepsy ...	...	...	...	...	...	...	...	...	...	...
System { Chorea ...	...	...	...	...	...	...	...	...	...	...
{ Other Conditions ...	4	...	4	2	2	...	...	2	...	50.0
Deformities ...	36	...	36	13	23	1	17	5	...	63.8
Miscellaneous ...	151	...	151	41	107	20	28	59	3	70.8
Totals ...	1056	...	1056	333	621	194	198	229	102	58.8

No. of children re-examined—738 with 1,056 defects.

FINDINGS OF MEDICAL INSPECTION OF SECONDARY SCHOLARS.

The number of individual children inspected during the year was 1,327 first examinations, and 70 special cases: 738 re-examinations were also made.

Exclusive of the 738 re-examinations, 1,397 children had 680 defects which required treatment, and 1,069 defects needing to be kept under observation. These latter defects were not referred for treatment.

In reviewing the defects found amongst Secondary School pupils it is observed that out of the 1,327 pupils medically inspected, 179 were found at the time of their examination, to be physically fit. Of the remainder, 1,148 children had defects to the number of 602 needing remediation, and 1,064 defects requiring to be kept under observation, making an average of 1.25 defects per child. In extracting these figures a severe standard has been set, e.g., a child found with one decayed tooth was recorded as defective.

UNCLEANLINESS.

Unsatisfactory bodily cleanliness was found in one case (one boy), i.e., .07 per cent. of all examined.

In 105 cases among the girl scholars, and two cases boys, unsatisfactory head conditions (nits) were found, that is, in 7.9 per cent. of girls inspected, and .15 of the boys.

NUTRITION.

Nutrition was below normal in 70 cases, 5.2 per cent. of all the scholars seen at routine inspections.

43 boys—7.7 per cent. of the 552 examined.

27 girls—3.4 per cent. of the 775 examined.

NOSE AND THROAT CONDITIONS.

Abnormal nose and throat conditions which were discovered at the routine inspections were as follows:—

	Number Examined	Tonsils		Mouth		Tonsils.		Slight Adenoids.
		and Adenoids.	Breathers.	Per Cent.	Per Cent.	Slightly Enlarged.	Much Enlarged.	
Boys	... 552	3.9	.1	3.9	1.0	.7		
Girls	... 775	.2	1.2	25.7	3.4	.1		

Miscellaneous diseased conditions of nose and throat were found in 5.5 per cent. of all scholars examined.

57 cases (4·2 per cent. of those examined) required operative treatment for either tonsils or adenoids, or both.

GLANDULAR CONDITIONS.

The following table shows the extent of glandular conditions in the scholars examined at routine inspections:—

		Number Examined.	Submaxillary. Enlarged. Per Cent.	Anterior Cervical. Enlarged. Per Cent.	Posterior Cervical. Per Cent.
Boys	...	552	—	—	—
Girls	...	775	·1	·2	—

LUNG DISEASES.

There were 14 children (1·0 per cent.) suffering from Bronchitis. Bronchial catarrh was discovered in 38 cases (2·8 per cent.), whilst other conditions accounted for 10, or ·7 per cent. of those examined.

SKIN DISEASES.

One case of Scabies (·07 per cent.), and four cases of Impetigo (·30 per cent.), were found, and other skin diseases were present in 67 cases (5·0 per cent.).

EXTERNAL EYE DISEASES.

Fourteen cases of Blepharitis (1·0 per cent.) were found. There were 6, or ·4 per cent. cases of other forms of eye disease.

DEFECTIVE VISION.

130 cases of defective vision (9·7 per cent.) were recorded. The extent of defect is shown in the following table:—

	No. Examined	Only one eye defective.				Cases where both eyes were equally defective.	Cases of unequal error.				Squint	
		Right		Left			Right		Left			
		$\frac{3}{8}$ to $\frac{5}{8}$	$\frac{6}{8}$ and less	$\frac{3}{8}$ to $\frac{5}{8}$	$\frac{6}{8}$ and less	$\frac{3}{8}$ to $\frac{5}{8}$	$\frac{6}{8}$ and less	$\frac{3}{8}$ to $\frac{5}{8}$	$\frac{6}{8}$ and less	$\frac{3}{8}$ to $\frac{5}{8}$		$\frac{6}{8}$ and less
		p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.	p.c.
Boys ...	552	1·9	2·3	2·5	·7	3·0	2·1	1·2	·3	1·2	·3	·3
Girls ...	775	3·6	·7	2·0	1·4	3·6	1·0	1·8	1·4	2·4	·7	·1

DEFECTIVE TEETH.

Defective teeth were found in 44·5 per cent. of children examined, as follows:—

	Number Examined.	Less than four decayed. Per Cent.	Four or more decayed. Per Cent.	Dirty Teeth. Per Cent.
Boys	... 552	43·3	8·8	1·0
Girls	... 775	33·9	5·1	·9

DEFECTS OF SPEECH.

Defects of stammering occurred in 8 cases (·6 per cent.), and one case had defective articulation.

HEARING.

The hearing was defective in two cases (·1 per cent.), the two cases occurring amongst the girls.

DEFORMITIES.

Deformities due to Rickets were evident in four cases (·2 per cent.), three boys and one girl. Deformities due to various causes other than Rickets occurred in 93 cases (7·0 per cent.) of the children examined.

CARDIAC AND CIRCULATORY DEFECTS.

Organic heart disease was found in eighteen (1·3 per cent.) of the boys examined, and in twenty (1·5 per cent.) of the girls. Eleven (·7 per cent.) of the scholars brought for routine inspection were anæmic. In addition, slight anæmia was present in five cases (·3 per cent.).

Miscellaneous diseases accounted for defects in 35 cases (2·6 per cent.) of those examined at routine medical inspection.

HEIGHTS AND WEIGHTS.

1. HEIGHTS.

BOYS				GIRLS			
Age	No. of Children Measured	Average Heights	Anthropo-metric Standard	Age	No. of Children Measured	Average Heights	Anthropo-metric Standard
		Centimetres	Centimetres			Centimetres	Centimetres
10	—	—	131.4	10	4	133	129.5
11	14	136	135.8	11	5	137	134.6
12	87	145	139.7	12	81	143	140.9
13	83	147	144.7	13	136	145	146.6
14	18	150	150.4	14	31	150	151.7
15	61	161	158.1	15	79	155	154.9
16	70	164	163.1	16	63	156	156.8
17	15	168	168.2	17	31	158	158.7
18	6	170	170.1	18	9	158	158.9
19	1	170	170.8	19	1	164	159.3

2. WEIGHTS.

BOYS				GIRLS			
Age	No. of Children Weighed	Average Weights	Anthropo-metric Standard	Age	No. of Children Weighed	Average Weights	Anthropo-metric Standard
		Kilos	Kilos			Kilos	Kilos
10	—	—	30.5	10	3	27.8	28.1
11	13	31.5	32.6	11	6	34.3	30.8
12	71	36.4	34.8	12	80	35.4	34.7
13	67	37.4	37.4	13	140	37.3	39.4
14	17	40.3	41.7	14	31	44.3	43.8
15	48	47.5	46.1	15	79	48.0	48.1
16	54	50.7	53.9	16	66	48.5	51.2
17	11	57.8	58.9	17	31	50.8	52.3
18	3	62.8	62.2	18	10	51.4	54.8
19	1	64.0	63.2	19	1	57.7	56.1

The heights and weights are taken by the Head Teachers. The pupils are measured and weighed without boots, otherwise ordinary indoor clothes being worn.

TREATMENT.

Parents were notified by post of the defects discovered in their children. They were advised to consult their medical attendants and were notified that the treatment at the Committee's School Clinics was available for those who could not afford to obtain such treatment.

The Committee's Health Visitors followed up the cases of defects requiring attention, and it was discovered that 58·8 per cent. of the defects had been treated.

The following work was undertaken at the Clinics:—

19 pupils made application for dental treatment, of whom 18 were treated at the School Clinics.

79 appointments were made for errors of refraction and 70 pupils were examined:—

Spectacles were recommended in 59 cases

Spectacles not needed in 6 cases

Changes of spectacles necessary in 4 cases

Changes of Spectacles not necessary 1 case

Two pupils were operated upon at the Tonsils and Adenoids Clinic.

In only three cases were charges made for treatment.

I desire once more to express my appreciation of the valuable co-operation of the Headmasters, the Headmistresses and their Staffs. To their diligence in notifying to this department cases which required special examination, and to their efforts to facilitate the work of the Medical Inspectors and the Health Visitors whilst visiting the Schools, is due a very large part of the success which School Medical Inspection has attained in this County.

To my colleagues for their loyalty in carrying out the policy of the Department, I am greatly indebted.

I am,

Your obedient Servant,

D. ROCYN JONES,

School Medical Officer

31st May, 1927.

APPENDIX I.

STATISTICAL TABLES.

A. ELEMENTARY SCHOOLS.

Table I.—Return of Medical Inspections.

A. Routine Medical Inspections.

Number of Code Group Inspections:—

Entrants	...	...	...	5,753	
Intermediates	...	...	...	4,208	
Leavers	...	...	...	4,036	
					13,997

Number of other Routine Inspections	—
Total Routine Inspections	13,997

B. Other Inspections.

Number of Special Inspections	...	2,132	
Number of Re-inspections	...	9,732	
Total		<u> </u>	11,864

Number of children specially examined		
owing to accidents upon School		
premises	...	...
		105

Total number of Individual Children inspected (Routine, Special, and Re-examinations)	25,966
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Table II. A.—Return of Defects found in the course of Medical Inspection in 1926.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Malnutrition	...	127	1212	23	215
Uncleanliness (See Table IV., Group V.).	...	—	—	—	—
Skin	Ringworm—Scalp	23	—	15	—
	Body	13	—	5	—
	Scabies	15	—	1	—
	Impetigo	128	—	31	—
	Other Diseases (Non-Tuberculous) ..	322	—	38	—
Eye	Blepharitis	284	—	66	—
	Conjunctivitis	62	—	17	—
	Keratitis	2	—	1	—
	Corneal Opacities	—	—	—	—
	Defective Vision (excluding Squint)	787	567	100	22
	Squint	175	10	26	—
Ear	Other Conditions	57	20	8	—
	Defective Hearing	77	—	36	—
	Otitis Media	11	—	7	—
Nose and Throat	Other Ear Diseases	95	—	56	—
	Enlarged Tonsils only	425	2549	194	99
	Adenoids only	7	113	29	88
	Enlarged Tonsils and Adenoids	1135	267	40	41
Enlarged Cervical Glands (Non-Tuberculous) ..	Other Conditions	297	104	93	—
Defective Speech	...	69	5	38	—

TABLE II—continued.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring be kept under observation but not requiring treatment.
Teeth—Dental Diseases	...	3074	6157	428	349
Heart and Circulation	Heart disease { Organic	399	—	8	—
	Anaemia { Functional	200	42 78	— 146	127 —
Lungs	Bronchitis	161	1068	42	—
	Other Non-Tuberculous Diseases	117	35	79	—
Tuber- culosis	Pulmonary :—				
	Definite	2	—	6	—
	Suspected	22	—	18	—
	Non-Pulmonary :—				
	Glands	2	—	7	2
	Spine	—	—	1	2
	Hip	5	—	—	—
	Other Bones and Joints	1	—	1	—
	Skin	—	—	1	—
	Other forms	2	—	4	—
Nervous System	Epilepsy	10	—	10	2
	Chorea	6	—	11	—
	Other conditions	2	65	24	—
Deformities	Rickets	3	86	2	—
	Spinal Curvature	41	9	9	—
	Other forms	86	74	20	—
Other Diseases and Defects	...	178	123	197	—

B.—Number of Individual Children found at ROUTINE Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

GROUP.		NUMBER OF CHILDREN.		Percentage of children found to require treatment.
		Inspected.	Found to require Treatment.	
Code Groups :—				
Entrants	...	5,753	949	16.4
Intermediates	...	4,208	347	8.2
Leavers	...	4,036	416	10.3
Total	...	13,997	1,712	12.2
Other Routine Inspections	...	—	—	—

Table III. Return of all Exceptional Children
in the Area in 1926.

			Boys.	Girls.	Total.
Blind (including partially Blind).	Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind ...	13	7	20
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	5	2	7
	Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ...	—	—	—
		Attending Public Elementary Schools ...	5	4	9
		At other Institutions ...	—	—	—
		At no School or Institution ...	4	6	10
Deaf (including Deaf and Dumb and partially Deaf).	Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ...	11	11	22
		Attending Public Elementary Schools ...	—	2	2
		At other Institutions ...	—	—	—
		At no School or Institution ...	8	5	13
	Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	—	—	—
		Attending Public Elementary Schools ...	9	4	13
		At other Institutions ...	—	—	—
		At no School or Institution ...	8	3	11
Mentally Defective.	Feebleminded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children ...	—	2	2
		Attending Public Elementary Schools ...	113	91	204
		At other Institutions ...	—	—	—
		At no School or Institution ...	50	34	84
	Notified to the Local Control Authority during the year.	Feebleminded ...	—	2	2
		Imbeciles ...	10	5	15
		Idiots ...	2	3	5

TABLE III—continued.

			Boys.	Girls.	Total.
Epileptics.	Suffering from severe Epilepsy.	Attending Certified Special Schools for Epileptics ...	1	1	2
		In Institutions other than Certified Special Schools..	—	—	—
		Attending Public Elementary Schools ...	3	4	7
		At no School or Institution ...	9	11	20
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools ...	12	6	18
		At no School or Institution ...	4	8	12
Physically Defective.	Infectious Pulmonary and Glandular Tuberculosis.	At Hospital or Sanatorium approved by the Ministry of Health or the Board ...	16	17	33
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	1	1
	Non-Infectious but active Pulmonary and Glandular Tuberculosis.	At Hospital or Sanatorium approved by the Ministry of Health ...	5	2	7
		At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools ...	—	—	—
		At Public Elementary Schools ...	2	—	2
		At other Institutions ...	—	—	—
		At no School or Institution ...	6	3	9
	Delicate children (e.g., pre- or latent Tuberculosis, Malnutrition, Debility, Anæmia, etc.)	At Certified Residential Open-Air Schools ...	—	—	—
		At Open-Air Departments ...	97	135	232
		At Public Elementary Schools ...	576	452	1028
		At other Institutions ...	—	—	—
	Active Non-Pulmonary Tuberculosis.	At no School or Institution ...	41	51	92
		At Sanatorium or Hospital approved by the Ministry of Health or the Board ...	8	6	14
		At Public Elementary Schools ...	1	1	2
		At other Institutions ...	—	—	—
		At no School or Institution ...	3	12	15

TABLE III—continued.

			Boys.	Girls.	Total.
Physically Defective.	Crippled children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools..	5	4	9
		At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools ...	—	—	—
		At Public Elementary Schools	192	171	363
		At other Institutions ...	—	—	—
		At no School or Institution ...	115	119	234

Table IV. Return of Defects Treated during the year ended 31st December, 1926.

Treatment Table.

GROUP I.—MINOR AILMENTS.

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin:—			
Ringworm—Scalp ...	35	41	76
Body ...	—	13	13
Scabies	1	14	15
Impetigo	3	100	103
Other Skin Diseases ...	46	189	235
Minor Eye Defects (external and others)	56	320	376
Minor Ear Defects	118	331	449
Miscellaneous	—	—	—
Total	259	1008	1267

TABLE IV.

GROUP II.—Defective Vision and Squint.

Defect or Disease.	NUMBER OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme.	Otherwiso.	Total.
Errors of Refraction (including Squint) ...	1311	—	261	1572
Other Defects or Disease of the eyes ...	—	—	—	—
Total	1311	—	261	1572

Total number of children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme	...	...	718
(b) Otherwise	...	...	261

Total number of children who obtained or received spectacles:—

(a) Under the Authority's Scheme	...	...	672
(b) Otherwise	...	...	261

GROUP III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.				
RECEIVED OPERATIVE TREATMENT.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or in Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total		
219	—	219	382	601

TABLE IV.

GROUP IV.—Dental Defects.

(1) Number of children who were:—

(a) Inspected by the Dentists:—

Age Groups—

Number.

5	...	...	...	48
6	...	...	...	2206
7	...	...	...	3541
8	...	...	...	3376
9	...	...	...	3073
10	...	...	...	2822
11	...	...	...	2486
12	...	...	...	2973
13	...	...	...	2692
14	...	...	...	1553
				— 24770
Specials	...	...	...	—

Total 24770

(b) Notified to require treatment (any permanent teeth defective) 11600

(c) Actually treated (included as above) ... 2876

(d) Re-treated during the year as the result of periodical examination ... 748

(2) Half-days devoted to ... { Inspection ... 346 } Total 1032
 { Treatment ... 686 }

(3) Attendances made by children for treatment ... 4093

(4) Fillings ... { Permanent Teeth ... 3341 } Total 3341
 { Temporary Teeth ... — }

(5) Extractions ... { Permanent Teeth ... 1142 } Total 6772
 { Temporary Teeth ... 5630 }

(6) Administrations of general anæsthetics for extractions 1986

(7) Other operations ... { Permanent Teeth ... 147 } Total 147
 { Temporary Teeth ... — }

GROUP V.—Uncleanliness and verminous conditions.

(i.) Average number of visits per school made during the year by the School Nurses ... 1·21

(ii.) Total number of examinations of children in the schools by School Nurses ... 56244

(iii.) Number of individual children found unclean ... 7207

(iv.) Number of children cleansed under arrangements made by the Local Education Authority ... —

(v.) Number of cases in which legal proceedings were taken:—

(a) Under the Education Act, 1921 ... —

(b) Under School Attendance Byelaws ... —

B. SECONDARY SCHOOLS.

Table I.—Return of Medical Inspections.

A. Routine Medical Inspection.

Number of Inspections at all ages:—

Boys	...	...	...	...	552
Girls	...	...	...	...	775
					<hr/>
Total				...	1,327
					<hr/> <hr/>

B. Other Inspections.

Number of Special Inspections	...	.	70
Number of re-inspections	...	...	538
			<hr/>
Total		...	608
			<hr/> <hr/>

SECONDARY SCHOOLS.

Table II. Return of Defects found in the course of Medical Inspection in 1926.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Malnutrition	...	—	70	4	—
Uncleanliness	...	—	—	—	—
Skin	Ringworm—Scalp	...	—	—	—
	Body	...	—	—	—
	Scabies	...	1	—	—
	Impetigo	...	4	—	—
	Other Diseases (Non-Tuberculous)	...	67	3	—
Eye	Blepharitis	...	14	5	—
	Conjunctivitis	...	—	—	—
	Keratitis	...	—	—	—
	Corneal Opacities	...	—	—	—
	Defective Vision (excluding Squint)	...	130	2	—
	Squint	...	3	—	—
Ear	Other Conditions	...	6	—	—
	Defective Hearing	...	2	—	—
	Otitis Media	...	1	—	—
Nose and Throat	Other Ear Diseases	...	4	—	—
	Enlarged Tonsils only	...	33	6	2
	Adenoids only	...	—	3	—
	Enlarged Tonsils and Adenoids	...	24	1	—
Enlarged Cervical Glands (Non-Tuberculous)	Other Conditions	...	36	2	—
		...	3	4	—
Defective Speech	...	8	1	1	—

TABLE II.—Continued.

Defect or Disease.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring treatment.
Teeth—Dental Diseases	...	89	502	10	3
Heart and Circulation	Heart disease Organic	37	—	—	—
	Functional	—	11	6	—
	Anæmia	11	5	11	—
Lungs	Bronchitis	14	38	—	—
	Other Non-Tuberculous Diseases	4	6	1	—
Tuber- culosis	Pulmonary :—				
	Definite	—	—	—	—
	Suspected	1	—	—	—
	Non-Pulmonary :—				
	Glands	—	—	—	—
	Spine	—	—	—	—
	Hip	—	—	—	—
	Other Bones and Joints	—	—	—	—
	Skin	—	—	—	—
	Other forms	—	—	—	—
Nervous System	Epilepsy	—	1	—	—
	Chorea	—	—	—	—
	Other Conditions	7	53	—	—
Deformities	Rickets	4	—	—	—
	Spinal Curvature	8	11	6	—
	Other forms	67	7	—	—
Other Diseases and Defects	...	24	11	13	—

B.—Number of Individual Children found at ROUTINE Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases).

GROUP.		NUMBER OF CHILDREN.		Percentage of children found to require treatment.
		Inspected.	Found to require Treatment.	
All ages :—				
Boys	...	552	105	19.0
Girls	...	775	130	17.2
Total	...	1,327	235	17.7
Other Routine Inspections	...	—	—	—

SECONDARY SCHOOLS.**Table III. Return of Exceptional Children.**

			Boys.	Girls.	Total.
Blind (including partially Blind).	Suitable for training in a School or Class for the totally blind	Attending Certified Schools or Classes for the Blind ...	3	4	7
Deaf (including Deaf and Dumb and partially Deaf).	Suitable for training in a School or Class for the totally deaf or deaf and dumb	Attending Certified Schools or Classes for the Deaf ...	—	—	—
Epileptics	Suffering from Epilepsy	Attending Certified Special Schools for Epileptics ...	1	—	1
	Suffering from Epilepsy which is not severe ...	At Public Elementary Schools	1	—	1
Physically Defective.	Non-infectious but active Pulmonary and Glandular Tuberculosis	At Public Elementary Schools	1	1	2
	Delicate Children ...	At Public Elementary Schools	77	56	133
	Crippled Children ...	At Public Elementary Schools	9	26	35
		At Certified Hospital Schools	1	—	1

Table IV. Return of Defects Treated during the year ended 31st December, 1926.

GROUP I.—MINOR AILMENTS.

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin:—			
Ringworm—Scalp ...	—	—	—
Body ...	—	—	—
Scabies ...	—	—	—
Impetigo ...	—	1	1
Other Skin Diseases ...	—	12	12
Minor Eye Defects (external and others) ...	—	8	8
Minor Ear Defects ...	—	16	16
Miscellaneous ...	—	—	—
Total ...	—	37	37

TABLE IV.**GROUP II.—Defective Vision and Squint.**

Defect or Disease.	NUMBER OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) ...	70	—	10	80
Other Defects or Disease of the eyes ...	—	—	—	—
Total	70	—	10	80

Total number of children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme 59

(b) Otherwise 10

Total number of children who obtained or received spectacles:—

(a) Under the Authority's Scheme 24

(b) Otherwise 10

GROUP III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.				
RECEIVED OPERATIVE TREATMENT.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or in Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
—	—	—	94	94

TABLE IV.

GROUP IV.—Dental Defects.

(1) (b) Notified to require treatment (any permanent teeth defective)	...	...	...	78
(c) Actually treated	...	...	...	18
(d) Re-treated during the year as the result of periodical examination	..	...		—
(3) Attendances made by pupils for treatment		...		18
(4) Fillings	{ Permanent Teeth ... 2 } { Temporary Teeth ... — }			Total 2
(5) Extractions	{ Permanent Teeth ... 48 } { Temporary Teeth ... — }			Total 48
(6) Administrations of general anæsthetics for extractions				17
(7) Other Operations	{ Permanent Teeth ... — } { Temporary Teeth ... — }			Total —

INDEX.

	Elementary Schools. Page.	Secondary Schools. Page.
Accidents upon School Premises ...	7.	...
Administrative County—		
Particulars of area, etc. ...	1.	...
Arrangements for Medical Inspection ...	6.	43.
Blind, Deaf and Dumb Children ...	40, 41, 53.	61.
Choice of Employment ...	42.	...
Co-operation of Parents, Teachers, etc. ...	39, 40.	...
Co-ordination of Services ...	2, 3.	...
Continuation Schools ...	42.	...
Deaf and Dumb Children ...	41, 53.	61.
Defective Hearing ...	13, 26, 51.	47, 59.
„ Speech ...	51.	47, 59.
„ Teeth ...	13, 26, 57,	47, 64.
Vision ...	52.	
Vision ...	12, 24, 51.	46, 59, 63.
Disinfection of Schools ...	15.	...
Ear Disease ...	13, 26, 51, 55.	59, 62.
External Eye Defects ...	12, 24, 55.	46, 62.
Feeding of Necessitous Children ...	32.	...
Findings of Medical Inspections ...	7.	45.
Glandular conditions ...	11, 51.	46, 59.
Heart Diseases in School Children ...	52.	47, 60.
Heights and Weights ...	...	48.
Infectious Diseases ...	14.	...
Laboratory Examinations ...	11, 14.	...
Lung Diseases in School Children ...	22, 52.	46, 60.
Medical Inspection Staff ...	1, 2.	...
Mentally and Physically defective children	6, 14, 27, 41,	61.
	53.	
Minor Ailments ...	10, 19, 20, 55.	62.
Miscellaneous Examinations ...	42.	...
Myopic Children ...	13.	...
Nose, Throat, etc., Diseases in School		
Children ...	10, 18, 51, 56.	45, 59, 63.
Nursery Schools ...	3, 42.	...
Nutrition ...	3, 9, 51.	45, 59.
Open-air Classrooms ...	30.	...
Orthopædic Treatment ...	27.	...
Physical Deformities in School Children	6, 14, 27, 52.	47, 60, 61.
	53.	
Physical Instructors, report of ...	32.	...
Provision of Meals ...	35.	...
Provision of Spectacles ...	25.	...
Payment of Railfares ...	22, 23, 25.	...
Payment for treatment of children at		
School Clinics ...	18.	48.
Percentage of children requiring treat-		
ment ...	52.	60.

INDEX—Continued.

	Elementary Schools. Page.	Secondary Schools. Page.
Re-examination of Children	15, 16, 26.	44.
Sanitary Survey of Schools	3.	...
Secondary Schools, Scholars examined in	...	45.
Scheme of Medical Inspection	6.	43.
School Hygiene	3.	...
„ Clinics	17, 18, 20, 23, 27.	...
„ Closures	14.	...
„ Baths	39.	...
Skin Diseases, School Children with ...	11, 23, 51. 55.	46, 59, 62.
Special Inquiries and Examinations ...	42.	...
Teeth of School Children	13, 18, 26, 57.	47, 64.
Tonsils and Adenoids	19, 21, 51, 56.	59, 63.
Travelling School Clinic	17.	...
Treatment of Defects	16, 17, 27, 55.	48, 62.
Tubercular Diseases in School Children	11, 22, 52, 54.	60, 61.
Uncleanliness of School Children ...	7, 57.	45.
Vision of School Children	12, 24, 51.	46, 59.
X-ray Treatment (Ringworm)	11, 18, 20.	...

STATISTICAL TABLES.

Table I. A.—Number of Children		
Inspected	50.	58.
B.—Special Inspections and		
Re-examinations	50.	58.
Table II. A.—Return of Defects found..	51.	59.
B.—Number of children found		
at Routine Inspections		
to require treatment ...	52.	60.
Table III. Numerical Return of all		
Exceptional Children ..	53.	61.
Table IV.—Treatment of Defects:—		
Group I.—Minor Ailments ...	55.	62.
„ II.—Vision & Squint ...	56.	63.
„ III.—Nose & Throat ...	56.	63.
„ IV.—Teeth	57.	64.
(1) (a) Inspections by		
Dentists	57.	...
(b) No. requiring		
treatment	57.	...
(c) No. treated	57.	64.
(d) Re-treated	57.	...
(2)—(7) Details of time		
given and of oper-		
ations undertaken		
at School Clinics ..	57.	64.
„ V.—Uncleanliness, etc. ..	57.	...

